

# Registration Form for Non Plan Admissions

Name of the School Nearest to Residence of the Applicant

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Name of the Student:- .....

Gender: .....

Date of Birth: .....

Class of Admission: .....

Stream (If applicable): .....

Mother's Name: .....

Father's Name: .....

Gurdian's Name (If applicable): .....

Category: .....

Residential Address: .....

Landline Phone No.: .....

Mobile No.: .....

Alternate Mobile No. (if any): .....

Type of Disability (If applicable): .....

Last class Passed: .....

Year of Passing last class: .....

Subjects passed in last class : .....

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Received registration form from .....  
s/o/d/o ..... for admission to class ..... for the  
academic session .....

Name of the Teacher (Rrecipient) .....

Signature of the Teacher .....