



D.A.V. PUBLIC PRIMARY SCHOOL

(Under the direct control & Management of DAV College Managing Committee, Chitra Gupta Road, New Delhi- 110055)

DARYA GANJ, NEW DELHI-110002

Ph.No. 011-23245156 ; E-mail : dav_public@rediffmail.com

Regn. No.: DAVPPS /

Admission No. :

Application For Registration/Admission Session _____

Recent Photo of Father

Recent Photo of Mother

Recent Photo of Child

NAME OF CHILD

[Grid for entering child's name]

DATE OF BIRTH* (DD) [] [] (MM) [] [] (YYYY) [] [] [] [] AGE AS ON 31ST MARCH 2015* : [] [] YEARS [] [] MONTHS

ADMISSION TO CLASS: [] GENDER* [] BLOOD GROUP: [] MOTHER TONGUE: []

WHETHER BELONGS TO SCHEDULE CASTE / SCHEDULE TRIBE / BACKWARD CLASS*: YES [] NO []
(if Yes, please attach the relevant documents)

LAST SCHOOL ATTENDED []
[Report card of the previous class attended from class I onwards]

RESIDENTIAL ADDRESS : (HOUSE NO. AND LANE) []

COLONY : AREA * [] STATE : [] PIN CODE * []
(Select strictly according to specification of the displayed list)

DISTANCE FROM SCHOOL [IN KMS.]* [] RESIDENCE TELEPHONE NO.: []

FATHER'S DETAILS

NAME: [] AGE: []

NATIONALITY: [] EDUCATIONAL QUALIFICATION: []

OCCUPATION* [] ANNUAL INCOME: []

OFFICE ADDRESS : []

OFFICE TEL. NO.: [] MOBILE NO.: [] E-MAIL ID: []

D. A. V. PUBLIC PRIMARY SCHOOL

DARYA GANJ, NEW DELHI-110002

Ph.No. 011-23245156 ; E-mail : dav_public@rediffmail.com

ACKNOWLEDGEMENT

Reg. No.: DAVPPS/ _____

Dated : _____

Registration in respect of _____

S/o / D/o _____ for admission to Class _____

Date and Time of Admission Test _____

Signature of Registration Clerk

