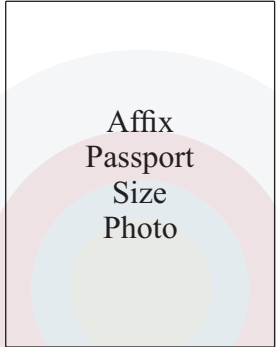


REGISTRATION FORM DARSHAN ACADEMY

Reg. No.



C.B.S.E affiliation no. 1630293
Bhamian Kalan, Chandigarh Road, Ludhiana Punjab - 141010
Ph - 0161-2824187 / 2824287 / 3951156
Email - infoludhiana@darshan.edu.in, ludhiana@darshanacademy.org
Url : www.darshanacademy.org



Affix
Passport
Size
Photo

Please type or write in Capital Letters PARTICULARS OF THE CANDIDATE

Class to which admission is sought:

For Session 20.....20.....

Name of the Candidate:

Gender: Female Male Date of Birth (DD/MM/YY)

Father's Name

Residential Address

Tel. Nos. (Res.) (Off) (M)

Mother's Name

Residential Address

Tel. Nos. (Res.) (Off) (M)

Guardian's Name (if other than father/mother):

Guardian's Address:

Tel. Nos. (Res.) (Off) (M)

Email (Father) _____ (Mother) _____ (Guardian) _____

School last attended / currently studying:

Class last passed / currently studying:

FAMILY INFORMATION

Father's occupation and office address : _____

Designation and Department (*if in service*): _____

Mother's occupation and office address : _____

Designation and Department (*if in service*) : _____

Guardian's occupation and office address : _____

Designation and Department (*if in service*) : _____

Name and class of sister / brother / cousin studying in the Academy.

| | Name | Relation | | Class |
|----|-------|--|-------|-------|
| 1) | _____ | Sister <input type="checkbox"/> Brother <input type="checkbox"/> Cousin <input type="checkbox"/> | _____ | _____ |
| 2) | _____ | Sister <input type="checkbox"/> Brother <input type="checkbox"/> Cousin <input type="checkbox"/> | _____ | _____ |

Name and class of sister / brother / cousin passed out of the Academy.

| | Name | Relation | Class | Year of passing out |
|----|-------|--|-------|---------------------|
| 1) | _____ | Sister <input type="checkbox"/> Brother <input type="checkbox"/> Cousin <input type="checkbox"/> | _____ | _____ |
| 2) | _____ | Sister <input type="checkbox"/> Brother <input type="checkbox"/> Cousin <input type="checkbox"/> | _____ | _____ |

I Mr / Mswould like to register my ward for admission in your esteemed school. I have read the prospectus and do agree that in case my ward is admitted in your school, I shall ensure the following :

- Obey all the rules and regulations of the Academy.
- Deposit all fees and dues within the stipulated period as revised from time to time.
- Personally see that my ward attends the school regularly and punctually in the prescribed uniform.
- Maintain perfect discipline in the school and follows all the instructions issued by the School from time to time.
- Enjoin upon him/her to take part in all the scholastic & co scholastic activities.
- Encourage him to take part in excursions and educational tours and not tender any lame excuse for seeking exemption.
- Attend all the Parent-Teacher Meets conducted by the school from time to time.
- Accept the decision of the Principal with regard to school discipline as final and binding.
- I understand that registration for admission does not, in any way, mean the right to admission of my ward to the proposed class.

Signature of Parent / Guardian

SUBMISSION OF FORM: This form is to be deposited in the school along with two recent passport size photographs and registration fee.

ACKNOWLEDGEMENT

Received Registration Form

Reg. No. for Class

Display of Admission List (Date) Last date of fee deposit

Please meet us to complete admission formalities on.....

Receptionist