

# SURAJMULL JAIN DAYANAND ANGLO- VEDIC PUBLIC SCHOOL

WEST SINGHBHUM, CHAIBASA-833201, JHARKHAND

**Affiliated to: Central Board of Secondary Education, New Delhi,  
Affiliation No: 3430098, School No: 08214**

**Jharkhand  
Zone - F**



## ADMISSION FORM

### FOR OFFICE USE:

- 1) Registration No : \_\_\_\_\_  
2) Date of Registration : \_\_\_\_\_  
3) Admission No : \_\_\_\_\_  
4) Receipt No & Date : \_\_\_\_\_

Paste a recent  
passport size colour  
photo of the  
student

### 1. To be admitted in Class \_\_\_\_\_ Sec \_\_\_\_\_

a) Name of the Student : \_\_\_\_\_ Sex(M/F) \_\_\_\_\_  
(In block letters)

In Hindi : \_\_\_\_\_

b) Date of birth (In Figures): \_\_\_\_\_ In Words \_\_\_\_\_

c) Aadhar No. of the Student: \_\_\_\_\_ (attach photocopy)

d) Blood Group: \_\_\_\_\_ e) Weight: \_\_\_\_\_ f) Height: \_\_\_\_\_

g) Colour of eyes: \_\_\_\_\_ h) Colour of hair: \_\_\_\_\_ i) Vaccinated(Yes/No) \_\_\_\_\_

j) Eye Sight(Normal/Impaired): \_\_\_\_\_ k) Hearing (Normal/Impaired) \_\_\_\_\_

l) Speech (Clear/Impaired): \_\_\_\_\_ m) Any allergy(yes/no): \_\_\_\_\_

n) Any medical information you would like to inform the school for special attention: \_\_\_\_\_  
\_\_\_\_\_

o) Category of the student(ST/SC/OBC/General): \_\_\_\_\_ Religion: \_\_\_\_\_  
(Submit the relevant certificate from a competent authority)

p) Particulars of the previous studies: *Name of the school:* \_\_\_\_\_

Class studied last: \_\_\_\_\_ Affiliated to.: CBSE/ICSE/State Board, No: \_\_\_\_\_

Address of the school: \_\_\_\_\_ Medium of studies: \_\_\_\_\_

q) Own brother or sister studying in this school: If 'yes' give details:

Sl. No.	Name	Class/Sec	Adm. No.	Year of admission

2) Contact Nos: 1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

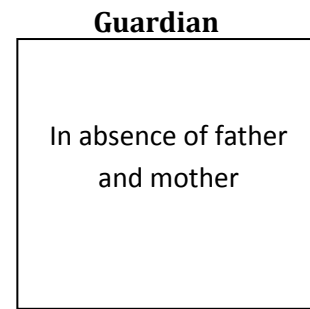
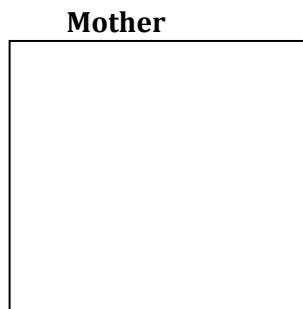
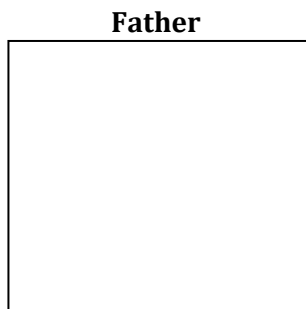
3) **Parents Details:**

- a) Father's Name: \_\_\_\_\_ (In English block letters)  
In Hindi: \_\_\_\_\_
- b) Mother's Name: \_\_\_\_\_ (In English block letters)  
In Hindi: \_\_\_\_\_
- c) Qualification: i) Father \_\_\_\_\_ ii) Mother: \_\_\_\_\_
- d) Occupation: i) Father \_\_\_\_\_ ii) Mother: \_\_\_\_\_
- e) Family income per month (Approx.): \_\_\_\_\_

4) **Guardian Details:** (If the child is not living with the Parents)

- a) Name: \_\_\_\_\_  
(In English block letters)  
In Hindi: \_\_\_\_\_  
Relation with the student: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Address of the guardian: \_\_\_\_\_
- 5) School Transport Required? (yes/no): \_\_\_\_\_ (If 'yes' . please fill separate transport form)
- 6) Address for correspondence: \_\_\_\_\_  
\_\_\_\_\_ Contact no: \_\_\_\_\_
- 7) Permanent Address: \_\_\_\_\_  
\_\_\_\_\_ Contact No: \_\_\_\_\_

8) **Photographs :**



**Declaration**

I hereby declare that the particulars in respect of my son/daughter/ward are true to the best of my knowledge and I shall not request the authorities in future for any alteration given above . I shall follow the rules & regulations of the school framed from time to time.

**Signature of Father**

**Signature of Mother**

**Signature of Guardian**

<b>For Office Use :</b>	Admitted in Class: _____ Sec. _____ on _____	
<b>Dealing Assistant</b>	<b>Verified by</b>	<b>Principal</b>