

# N.B.N. SCHOOL

SECTOR 29-B CHANDIGARH

SECTOR 12- A PANCHKULA

(Issue of Registration Form does not ensure admission)

## REGISTRATION FORM

*Academic Session 20*

Registration Form No. \_\_\_\_\_ Receipt No. \_\_\_\_\_

(For Office Use)

Please register the name of my son/daughter/ward for admission to your school.

Admission to Class \_\_\_\_\_

1. Name of Child in full (Block Letters) \_\_\_\_\_

2. Master/Miss : \_\_\_\_\_

Date of Birth

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(DD/MM/YYYY)

(In words) \_\_\_\_\_

3. Age as on 31st March, 20 \_\_\_\_\_ years \_\_\_\_\_ months. \_\_\_\_\_

4. Nationality of the child \_\_\_\_\_

5. Residential address with complete postal address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Res. Tel No. \_\_\_\_\_

6. Father's Name (Block Letters) \_\_\_\_\_

Academic Qualification \_\_\_\_\_

Occupation & Designation \_\_\_\_\_

Name & Address of the Organisation where employed \_\_\_\_\_

\_\_\_\_\_

Office Tel No, \_\_\_\_\_ Mob. \_\_\_\_\_

e-mail : \_\_\_\_\_

7. Mother's Name (Block Letters) \_\_\_\_\_

Academic Qualification \_\_\_\_\_

Occupation & Designation \_\_\_\_\_

Name & Address of the Organisation where employed \_\_\_\_\_

Office Tel No, \_\_\_\_\_ Mob. \_\_\_\_\_

e-mail. : \_\_\_\_\_

8. Proficiency of the child in games/ co-curricular activities/ outstanding achievements (enclose attested copies of certificates) (Not applicable for pre- nursery and Nursery)
9. If any siblings ( real brother of sister) already studying in this school.  
 Name \_\_\_\_\_ Admn No. \_\_\_\_\_ Class \_\_\_\_\_  
 Name \_\_\_\_\_ Admn No. \_\_\_\_\_ Class \_\_\_\_\_
10. Areas in which you could contribute to enrich school life in term of time, skill, etc. (Please tick)  
 Cultural            Medical            Media            Professional            Sports            Academic
11. Are you interested in availing the transport facility ?    Yes    No

**INSTRUCTIONS**

**KINDLY NOTE :**

- \* Please attach attested photocopy of Birth Certificate of the child.
- \* Paste one passport size photo of the child's father and mother in the space provided.
- \* Incomplete/ Invalid forms will be rejected.
- \* The School provides transport facilities but offers no guarantee that a seat in the school bus will be available. If the buses are full to capacity or do not ply in the area of your residence, it will be the responsibility of the parents/ guardians to drop and collect the child from the specified bus stop.

**AGE ELIGIBILITY :**

Children born between the given dates are only eligible for the respective classes :-

- Play Classes                    ( 1st April, 2007 to 31st March, 2008)  
 Nursery                            ( 1st April, 2006 to 31st March, 2007)  
 L.K.G.                                ( 1st April, 2005 to 31st March, 2006)

**DECLARATION**

I/We hereby certify that the above information is correct to be the best of my/ our knowledge and belief Further, I/We fully understand that the school, on accepting the Registration Form of my/ our ward, is not bound to grant admission, as the admission is purely based on merit-cum availability of seats. I also understand that the decision of the Principal regarding admission will be final and binding on me. I further undertake to abide by the School Rules. I also certify that I have read all the above given instructions carefully.

	Name	Signature
Father	_____	_____
Mother	_____	_____
Guardian (in absence of parents)	_____	_____
Date :	_____	
Place :	_____	

\* The timing for submission of registration form is 9-00 am to 12-30 p.m. on all working days.