



GURU HARKRISHAN PUBLIC SCHOOL

KAROL BAGH, NEW DELHI – 110005

APPLICATION FOR REGISTRATION (2023-24)

Registration No. _____

FOR OFFICE USE ONLY

Class to which admission is sought _____

Admission No.....Date.....

Photograph to be attached with this form

1. Name of the child (In full Block Letters).....
2. Date of Birth (in words).....
(In figures).....
3. Place of birth.....4. Nationality.....5. Religion.....
6. **CATEGORY** (i) SC/ST/OBC..... (If yes, attach relevant certificate) (ii) General.....

7. Details about Parents/Guardian:

7.1 FATHER

Name

Educational Qualifications.....

Whether GHPS Alumni (Yes/No).If yes, mention session with ADMN. No.

Occupation/Designation.....

Address	OFFICE	RESIDENCE
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Telephone No..... Telephone No.....

Monthly Income of Father.....

7.2 MOTHER

Name.....Educational Qualifications.....

Whether GHPS Alumni (Yes/No).If yes, mention session with ADMN. No.

Working or not. If working, give office address with designation.....

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Telephone No. Office.....Residence.....Monthly Income of Mother(if any).....

7.3 GUARDIAN (Either Authorized by Parents or in the absence of Parents)

Name

Occupation/Designation.....

Office Address.....

Residential Address.....

Telephone no. Office.....Residence.....

8. Brothers /Sisters already studying in this school:

	Name	Class/Sec	Admn.No.
(a)	_____	_____	_____
(b)	_____	_____	_____

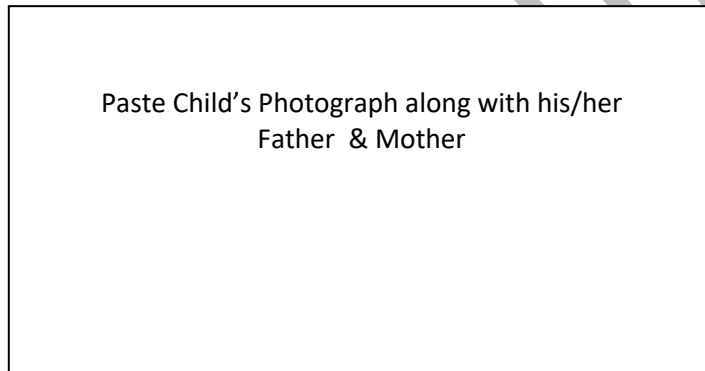
9. PREVIOUS EDUCATION OF THE CHILD

Name of the School last attended.....

Class upto which studied.....

CERTIFICATE FROM THE PARENT

I/We hereby certify that the above information provided by me/us is correct and I/We understand that if the information is found to be incorrect or false, the ward shall be automatically debarred from selection/admission process without any correspondence in this regard. I/We also understand that the application/ registration/ short listing do not guarantee admission to my ward. I/We accept the process of admission undertaken by the school and I/We will abide by the decision taken by school authorities.



Date.....

Signature of Father/Mother

FOR USE BY THE SCHOOL OFFICE

Admitted to Class: _____ Sec. _____ Admn No. _____ Date of Joining: _____

Receipt No. _____ Date: ____/____/____ Amount: Rs. _____

1. All Relevant Documents have been verified & found correct. Yes _____ No _____

2. Pending document, if any _____

UDC.

Accountant

OFFICE SUPDT.

PRINCIPAL