

TARNA, VARANASI

Vyas Bagh, Airport Road, Tarna, Varanasi – 221105 Ph.: 6388906900, 6388906901 | Email: admission.vns@jaipuria.school Visit: www.jaipuriaschoolsvaranasi.com

REGISTRATION CUM ADMISSION FORM

Application Form No. Date of Submission Reg. No.

Scholar No.

Important: Please fill all the details in CAPITAL LETTERS using black or blue pen only

DOCUMENT CHECK LIST

(1) Photograph of child (2) Photograph of Parents (3) Birth certificate of the child (4) Photocopy of vaccination card (For Pre-Primary)
(5) Aadhar Card of Child & Parents (6) Transfer certificate and Marksheet from previous school (Class 2 & above)

	Please affix latest Passport size photograph in colour	Please affix latest Passport size photograph in colour	Please affix latest Passport size photograph in colour	
	STUDENT	MOTHER	FATHER	
GENERAL INFOR				
I/We are seeking adm	nission in class		Session	
PERSONAL DETA	ILS OF STUDENT			
Surname	First Nan	าe M	iddle Name	
Date of Birth	Age as on 31st March 20 Years Months Days			
Nationality	Jationality Sex			
Do you belong to Ger	n./SC/ST/OBC/EWS/Disab	led/Single Girl Child (Attach ce	ertificate if applicable).	
GEN SC	ST OBC EV	VS Disabled Singl	e Girl Child	
		5	Pincode	
Mailing Address				
		City	Pincode	
Mother Tongue		Home Town		
Aadhar Card No	Blood Group of the child			
HEALTH INFORM	ATION (if any)			
	-			
Any other health prol	blem			
- 1				

DETAILS OF PARENTS / GUARDIANS

1.	Full Name (in Capital Letters)	Mother	Father	
2.	Age	Mother	Father	
3.	Nationality	Mother	Father	
4.	Educational Qualifications	Mother	Father	
5.	Occupation	Mother	Father	
6.	Designation	Mother	Father	
7.	Annual Income	Mother	Father	
8.	Office Address	Mother	Father	
9.	Tel. No. (O)	Mother	Father	
10.	Mobile & Email ID	(Mob.) (Email)	(Mob.) (Email)	
11.	Local Guardian (If applicable)	Relation with child Address	Contact Details	

If parents are divorced, living separately or widowed, with whom is the child living?

Name & Address of the previous school with Class
No. & date of T.C. issued by previous school with status of result:
Whether previous school was affiliated with CBSE: Yes No
If, the previous school was not affiliated with CBSE, specify name of the Board
Result of previous examination Percentage
If seeking admission to Class XI

BROTHERS / SISTERS

Name	Age	School	Class	Mention the branch if studying in Seth Anandram Jaipuria School
TRANSPORT Transport Facility required: Yes No Staff Child: Yes No				
Approximate distance from school availability Please note: Transport Facility is subject to availability				
I hereby declare that the above information furnished by me is correct to the best of my knowledge & belief, if any information or document supplied by me is found to be incorrect, I will be responsible for the same. I shall abide by the rules of the School.				

Date		
Place	Thumb Impression / Signature of Mother	Thumb Impression / Signature of Father

FOR OFFICE USE ONLY

This is to certify that all details as mentioned on the application form have been checked and relevant papers have been found to be in order.		
Date	Name & Signature of Admission In-Charge	
This applicant may be given admission to Class being in order and authentic, and realisation of application dues.		, subject to all information and documents

Date

Principal

FOR FEE COUNTER USE ONLY

Name:			
Admitted to:	Class	Section	
Fee receipt Number:		Dated	MM/DD/YYYY
Name has been entered in Class Attendance Register?		Yes	No
Student Registration Number in Admission Withdrawal Register is:		Registration Number	Registration Volume

	Details of Fee received
Registration Fees	
Admission Fees	
Composite Annual Fees	
Examination Fees	
Security Deposit	
Optional Fee	
Hostel Fee, if applicable	
Imprest Fee	
TOTAL	
TOTAL (in Words)	
Mode of payment & details	

Date

Office Supervisor / Accounts Officer

Admission considered by the School is in accordance with provisions of the Board and approved