



# HOLY CHILD AUXILIUM SCHOOL

POORVI MARG, VASANT VIHAR

## APPLICATION FORM FOR ADMISSION (2020 -2021)

Child's Photo

Affix Latest  
Photograph  
Child

Father's Photo

Affix Latest  
Photograph  
Father

Mother's Photo

Affix Latest  
Photograph  
Mother

REGISTRATION NO.

CLASS APPLIED FOR :

### STUDENT'S DETAILS

STUDENT'S NAME \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

GENDER Male  Female

SOCIAL CATEGORY \_\_\_\_\_

MOTHER TONGUE \_\_\_\_\_

NATIONALITY \_\_\_\_\_

BLOOD GROUP \_\_\_\_\_

MOBILE NO. \_\_\_\_\_

RELIGION \_\_\_\_\_

AADHAAR NO. \_\_\_\_\_

LAST SCHOOL \_\_\_\_\_

LAST CLASS \_\_\_\_\_

LAST RESULT \_\_\_\_\_

AWARD WON SO FAR IN SPORT, ARTS OR ACADEMIC \_\_\_\_\_

### DOES STUDENT HAS ANY SIBLING IN THIS SCHOOL :

S. No.	Name	Adm No.	Class & Sec. presently studying in
1			
2			

### RESIDENTIAL ADDRESS :

\_\_\_\_\_

\_\_\_\_\_

### PERMANENT ADDRESS :

\_\_\_\_\_

\_\_\_\_\_

**PARENT INFORMATION**

**FATHER**

**MOTHER**

a). Name : \_\_\_\_\_

b). Designation : \_\_\_\_\_

c). Organization : \_\_\_\_\_

d). Official Address : \_\_\_\_\_  
: \_\_\_\_\_

e). Mobile No. : \_\_\_\_\_

f). Email Id : \_\_\_\_\_

g). Alumni : \_\_\_\_\_

h). Alumni Year : \_\_\_\_\_

i). Passing Class : \_\_\_\_\_

j). College/University : \_\_\_\_\_

**GUARDIAN INFORMATION**

Guardian Name : \_\_\_\_\_ Mobile : \_\_\_\_\_

Address : \_\_\_\_\_

**MEDICAL INFORMATION**

**HEARING**

Any Difficulty Observed in Hearing : \_\_\_\_\_

Specify(Difficulty Observed in Hearing : \_\_\_\_\_  
\_\_\_\_\_

Any Consultation with doctor done : \_\_\_\_\_

Specify(Any Consultation with doctor done) : \_\_\_\_\_  
\_\_\_\_\_

**VISION**

Any Consultation with doctor done : \_\_\_\_\_

Specify(Any Consultation with doctor done) : \_\_\_\_\_  
\_\_\_\_\_

Use of spectacles / Corrective lenses : \_\_\_\_\_

Specify(Use of spectacles / Corrective lenses) : \_\_\_\_\_  
\_\_\_\_\_

Any allergy / any medical information that school should be aware of : \_\_\_\_\_  
\_\_\_\_\_

**DOCUMENTS ARE MANDATORY AT THE TIME OF ADMISSION**

- |                                      |                                      |
|--------------------------------------|--------------------------------------|
| Birth Certificate                    | Adhar card copy of parents and child |
| Transfer Certificate                 | Progress card report of two years    |
| Passport size photograph of child(2) | Vaccination card copy                |
- Those who belongs to SC/ST& OBC submit the Certificate

**DECLARATION BY THE PARENT/GUARDIAN**

I (YOGESHGOYAL and ANITA GOYAL) declare that the statements provided in this application is correct to my knowledge and if found otherwise I shall abide by the decision of the management. I agree to abide the rules, regulations and fee structure of school.

Date : 28/07/2020

Signature of the Parent/Guardian

**H.C. AUXILIUM SCHOOL OFFICE USE ONLY**

Admission Co-ordinator

Principal

Date : .....

Date : .....