



H.C. AUXILIUM SCHOOL - NEW DELHI

ADMISSION PRE-PRIMARY CLASS (NURSERY) 2023-2024 APPLICATION FORM

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| <p>Family Photograph (Father, Mother & child/children together in one photo)</p> <p>(Paste)</p> | <p>Passport Size Photo of the Candidate</p> <p>(Paste)</p> | <p>FOR OFFICE USE ONLY</p> <p>Registration No. Pre-Primary 2023-24</p> |
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(Fill the following in BLOCK letters)

| | | | | | | | | |
|-----|--|------------|-----------|-------------------|---|--|--|--|
| 1. | Name of the Candidate: | | | | | | | |
| 2. | Date of Birth: (Only girls born on or before 31-03- 2020 are eligible) | | | | | | | |
| | | D a t e | M o n t h | Y e a r | | | | |
| 3. | Date of Birth in words: | | | | | | | |
| 4. | Sex: | GIRLS ONLY | | 5. SC / ST / OBC: | | | | |
| 6. | Religion: | | | | 6. a. If Christian, specify the Denomination: | | | |
| 7. | Mother Tongue | | | | 8. Locality | | | |
| 9. | Aadhar No: | | | | | | | |
| 10. | Father's Name: | | | | | | | |
| | Qualification: | | | | Designation: | | | |
| | Office Address: | | | | | | | |
| | Tel. / Mobile No.: | | | | | | | |
| 11. | Mother's Name: | | | | | | | |
| | Qualification: | | | | Designation: | | | |
| | Office Address: | | | | | | | |
| | Tel. / Mobile No.: | | | | | | | |

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| 12. | Residential Address: | |
| | Tel. / Mobile No.: | |
| 13. | Has the applicant got facility of safe transport to school? YES / NO | <input type="checkbox"/> |
| 14. | Is sibling (Real Sister) studying in H.C. Auxilium? YES / NO | <input type="checkbox"/> |
| | Name of Sibling (Real Sister) _____ Cl. & Sec.: _____ Admn. No. _____ | |
| 15. | Is the candidate's mother registered Alumna of H.C. Auxilium Vasant Vihar? | <input type="checkbox"/> : YES / NO |
| | If yes, year of passing | <input type="checkbox"/> : Class X <input type="checkbox"/> Class XII <input type="checkbox"/> |
| | HCA Alumni Registration No: | <input type="text"/> |
| 16. | Is the job of the parents transferable? (If Yes enclose authenticated documents) | <input type="checkbox"/> |
| 17. | Any Medical History: | |

CERTIFICATE

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 does 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 the school authorities.

Signature of the Mother

Signature of the Father

Date: