

Vaishali Public School (Recognized)

(Managed by: VAISHALI EDUCATIONAL SOCIETY (Regd.))
Sector-3 A, Plot No. 216/01, Vaishali Ghaziabad (U.P.), Pin : 201010
Phone : 2770301

Registration No. _____

Latest
Passport
Size
Photograph
Of the child

ADMISSION FORM

1. NAME (In Block Letters) _____ SURNAME _____
 2. DATE OF BIRTH (In Fig) _____ (In Words) _____
 3. Sex Male/Female _____ Religion/Community _____
 4. Class to which admission sought _____
 5. Last School attended : (Name of the School) _____
(Recognized/Unrecognized) _____
- Address : (Local Residential Address) _____
_____ Tel. (Res.) _____

PARENTAL INFORMATION

Father's

Mother's

- | | |
|------------------------------------|-------|
| a. Name _____ | _____ |
| b. Age _____ | _____ |
| c. Educational Qualification _____ | _____ |
| _____ | _____ |
| d. Occupation _____ | _____ |
| _____ | _____ |
| e. Address (Official) _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| Tel. no. _____ | _____ |

CERTIFICATE

I hereby state that all the information given in this Admission Form is true and correct to my Knowledge and nothing has been concealed therefrom.

Date: _____

Signature (Parents)

FOR OFFICE USE ONLY

ADMITTED ON _____

RECEIPT NO. _____

DATED _____

SIGNATURE (ACCOUNTS)

(PRINCIPAL)