

Vishal Bharti Sr. Sec. School

(Recognized by Directorate of Education, Delhi & Affiliated to CBSE)

Registration / Admission FormRecent coloured
photograph of
candidate,
preferably face
focusing and of
high quality**The Principal****Vishal Bharti Sr. Sec. School****Parwana Road,****Saraswati Vihar, PitamPura****Delhi-110034**

Please register/admit my son/daughter/ward to the School in class_____General Category for Session 2026-27.

1. Name of Student:

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(IN CAPITAL LETTERS)**Aadhar No.** _____ **PEN NO / APAAR ID** _____2. Date of Birth

D	D	M	M	Y	Y	Y	Y

 Age as on 01.04.2026: _____

(In Words) _____

3. Gender: Male ☐ Female ☐ Transgender ☐4. Nationality: _____ **Cat:** Gen/SC/ST/OBC _____ (if yes, attach proof).

5. Minority Status (Please circle) : SIKH / JAIN / BUDDHIST / PARSI / CHRISTIAN - _____

6. Residential address: _____
_____ Pin Code _____

Contact Nos.: _____ Office: _____ Residence _____

7. The Distance of School from your locality (in Km, as per google map): _____

8. Single Parent Yes / No: If yes, please specify and attach proof ** _____

9. Details of Father	Recent coloured photograph of Father , preferably face focusing and of high quality	9. Details of Mother	Recent coloured photograph of Mother , preferably face focusing and of high quality
Name: _____		Name: _____	
Aadhar No. _____		Aadhar No. _____	
Age: _____ School Alumni: Yes / No If yes, year of Passing: _____		Age: _____ School Alumni: Yes / No If yes, year of Passing: _____	
Qualification : _____		Qualification : _____	
Occupation (Govt/Pvt/Self/Other) _____		Occupation (Govt/Pvt/Self/Other) _____	
Designation: _____		Designation: _____	
Office Name & Address: _____ _____		Office Name & Address: _____ _____	
Approx. Annual Income (Rs.) _____		Approx. Annual Income (Rs.) _____	
Email ID _____		Email ID _____	
Mobile: _____ Ph(Off): _____		Mobile: _____ Ph(Off): _____	

9. Is the student the only child of Parent (with no sibling): Yes / No: _____

10. Sibling Real Brother/Sister: Yes / No (Tick the appropriate) Brother _____ Sister _____

If Sibling in the same school, give details of sibling: Name: _____ Class: _____ Sec: _____

11. Child with special needs Yes / No (if yes, enclose authenticated documents) - _____

☐ Blind ☐ Deaf ☐ Handicapped ☐ Dyslexic ☐ Spastic ☐ Others: _____

12. Medical Status of the student (Kindly enclose all the relevant documents stating the illness)

(1) Sickness, if any : _____

(2) Allergy , if any : _____

(3) Medication Prescribed : _____

(4) Blood Group : _____

13. Last School Attended by Student: _____

Class: _____ Percentage of Marks / Grade: _____

14. In case of Emergency / Absence of Parents: Person to be Contacted: _____

Relation: _____ Contact No. _____ Signature: _____

16. In case of your child is admitted, what kind of Transport would you like to use: by self / School Bus _____

➤ Mention the nearest landmark - _____

(Note: School buses are available on their existing routes. Kindly contact at School Reception / Transport In-charge of Route for details, before taking the admission)

17. Documents to be enclosed: (Tick app.)

(a) Photocopy of Aadhar Card. (Student, Mother & Father)

(b) Date of Birth Certificate in original (issued by MCD or any other equivalent authority)

(c) Two recent passport size photographs of candidate, Mother & Father (photograph, preferably face focusing and of high quality).

(d) School leaving certificate in original from Govt. recognized school. (For Class II onwards).

(e) Residence Proof (Electricity Bill/Delhi Jal Board Bill/MTNL Landline Bill).

(f) Medical Fitness Certificate issued by Registered Medical Practitioner.

(g) Caste certificate (In case of SC/ST/OBC)

(h) All the documents should be self-attested.

(i) Form should be filled in every aspect with Blue ink. No column should be left blank. Name of Candidate / Father / Mother should be in format as per documents enclosed.

(j) Application for Custodian (Ref. to Point No. 8)**

Certificate/Documents from the Parent

I/we hereby certify that the above information provided by me/us is correct and I/we understand that if any information is found to be incorrect or false or I fail to deposit required documents. Our ward shall be automatically debarred from selection/admission process without any correspondence in this regard. I/We accept the process of admission undertaken by the school and I/we will abide by the decision taken by the school authorities.

Date: _____ Place: _____

Name of Mother: _____

Name of Father: _____

Signature of Mother

Signature of Father

Note: Parents are requested to submit all the required documents before admission otherwise admission may be cancelled.