

Doon Public School

B-2, PASCHIM VIHAR, NEW DELHI-110 063 PH.: 011-42316890-94, 25268686, 25252197 FAX : 25281799 E-mail: doonpublic_school@yahoo.co.in , www.doonpublicschool.in

Reg.	No.									

Photo

REGISTRATION FORM

1.	Name of the child
2.	Date of Birth DATE MONTH YEAR
3.	Age as on 1st April (in years & months)
4.	Class to which admission sought
5.	Residential Address
	Phone
6.	Type of family:
7.	Name the other members of your family staying with you

8.	Mother's Particulars :	Fa	ather's Particulars :						
Ed Na	une	I	Name Edu. Qualification Name of school & college atten	ded					
De	esignation	. п	Designation						
Ac	ldress	1	Address						
Phone			Phone						
8. 10.	Oross annual income of the parents Name of the previous school attended Details of brother / sister:								
	Name	Age	Name of School / College	Class					
1.									
2.									
3.									
1									

12. Has your child any	medical problem? Yes / No		
13. Interests & talents. I	s your child good in any of th	e following? (ti	ck ✓)
□ Dance	☐ Music-Vocal / instrume	ntal	
☐ Keyboard	☐ Harmonium	□ Tabla	□ Sitar
☐ Sports / game			
□ Painting	☐ Sketching	□ Craft	8
□ G.K.	□ Debate	☐ Reading	
14. Would you eagerly	finance the activities taken up	by your child?	Yes / No
15. Who will look after	the studies of your child?		
16. Why do you want to	put the child in this school?		
17. Do you know anyon	e in this school?		
18. Whether day boardi	ng facilities required	Yes [□ No
19. Whether Hostel faci	lity required	□ No	
20. Whether Transport	acility required	☐ Yes ☐	□ No
21. How can you co-op	erate with the school as a part	of your extra c	ontribution to the
welfare of your chi	ldren/children in general?		

I unde my cl	erstand that nild may be	registration doe selected or rejec	s not mean ted as per t	automation he decision	on of the	on will follow Selection Con	and that mittee.
						Yours	faithfully
Date						Parent's S	Signatur
		FOR OF	FICIAL	USE (ONLY		
		Т	EST RES	ULTS			
Nursery	Preparatory	Other Classes	English	Hindi	Maths	Sc. & Tech.	Soc. Sc.
			INTERVI	EW			
Remarks	:						

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Selected	/ Not Selected						
Date							
Documen	ts submitted :	Two Passport S Certificate of I Transfer Certif Documents for	Date of Birth. icate & Progr	ess Report		Director	s Signatur