



D.A.V. PUBLIC SCHOOL

(Affiliated to Central Board of Secondary Education, New Delhi)

Main - 19, Sitaram Nagar, Velachery, Chennai - 600 042

Vatika - Plot No. 131 & 132 Bhuvaneshwari Nagar, 2nd Main Road, Velachery, Chennai-42
(Under the Direct Control of D.A.V. College Trust and Management Society, New Delhi)

Affix
Latest
Stamp
Size Photo of
Father

Affix
Latest
Stamp
Size Photo of
Mother

Affix
Latest
Stamp
Size Photo of
Student

(Do Not Stick Passport Size photos)

REGISTRATION FORM FOR PRE-KINDER GARTEN FOR THE ACADEMIC YEAR 201__ - 1__

FOR OFFICE USE - Form is complete Form is incomplete

Admission Number : _____ Date of Admission : _____

INSTRUCTIONS : 1. Kindly fill the form in CAPITAL LETTERS & AVOID OVER WRITING.

2. Family Name/Surname/Father's name/initial should be written after Student's name.

3. If any field is left blank in the form or if any of the required document is not submitted, then the form will be viewed as 'incomplete' and will be rejected.

4. Fields with (*) are required for the statistical data to be provided to the Government Authorities.

5. Parents 'on transfer' must fill only Chennai residential address, office address and phone no. in this form.

1. Student's Name :

2. Date of Birth (in figures) : 3. Sex : Male Female 4. Blood Group:
Date Month Year

Date of Birth (in words) _____

5. Exact age as on 31.5.201__ : Years Months Days

6. Nationality : Father _____ Mother _____ Student _____

7. Place of Birth : **Student** : State _____ City _____

Father : State _____ City _____ **Mother** : State _____ City _____

8. Religion * : Father _____ Mother _____ Student _____

9. Community * : OTHERS SC ST BC MBC OBC Denotified community

10. Mother Tongue of the Student : _____ Other Language(s) spoken at home 1. _____ 2. _____

11. Second Language : TAMIL HINDI

Whether Father Mother Both have studied Hindi in School College Not studied Hindi

12. Is the child handicapped? If yes, specify the nature of handicap _____

13. Residence Address : _____

PIN

14. Distance from Residence to School : within 1 Km 1 - 3Kms 3 - 5 Kms 5 - 8 Kms above 8 Kms

15. Mode of Transport likely to be used to commute to School :

School Transport Walk Two Wheeler Own car Hired Van / Auto

16. a) Has the candidate's Brother/Sister applied for Admission to any other class in this school: Yes No

b) If Yes - Name : _____ Class to which admission is sought: _____

17. ABOUT SIBLINGS (Do not give information about the cousins of your ward)

Sl. No.	Name of own Brother / Sister	Class & Sec.	Studying in D.A.V.P.S. (✓)	Name of the School / College other than D.A.V.P.S.
1.				
2.				

18. PARENTS - **ALUMNI** OF D.A.V. PUBLIC SCHOOL, CHENNAI

- a) Father Yes No Year of leaving School Class Studied at the time of leaving
- b) Mother Yes No Year of leaving School Class Studied at the time of leaving

19. PARENTS - **STAFF** OF D.A.V. PUBLIC SCHOOL, CHENNAI

- a) Father Yes No Years of Service as on date _____
- b) Mother Yes No Years of Service as on date _____

20. INFORMATION ABOUT PARENTS (It is mandatory to fill up all the particulars of both the parents)

Particulars	Father		Mother	
	a) Name as stated in the Birth Certificate of the child / other proof			
b) Age	<input type="text"/> Years		<input type="text"/> Years	
c) Educational Qualification (Specify Degree)				
d) Name of the Organization				
	Designation	Department	Designation	Department
	<input type="checkbox"/> Gazetted	<input type="checkbox"/> Non-Gazetted	<input type="checkbox"/> Gazetted	<input type="checkbox"/> Non-Gazetted
e) Business Specify the nature of business	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO	
f) Office Address/ Business Address	_____		_____	
	Chennai - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Chennai - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Chennai Office Phone :	044 - _____		044 - _____	
Mobile No.:				
E-mail ID :				
g) Income :	Rs. _____ Per month		Rs. _____ Per month	

21. INFORMATION ABOUT PARENTS (It is mandatory to fill up all the particulars of both the parents)

EMPLOYMENT OF PARENT				Please (✓) in appropriate column						
	Employed in State Govt.	Employed in Central Govt./Public Sector	Professional Practice - Doctor/C.A., Lawyer Any other	Employed in				If Employed in the field of Education (Specify)		
				Private Company	IT	Non - IT	Self Employed (Specify)	School	College	University
Father's Employment										
Mother's Employment										

22. Whether Student has a 'Legal Guardian' Yes Not-Applicable

- a) If yes, does the child have a **legal guardian** in place of Father Mother Both
- b) If yes, please submit the legal documents of guardianship.

23. Whether Student is an 'Adopted child' Yes Not-Applicable

If yes, please submit the 'Legal Documents' of adoption

24. **TO BE FILLED IN BY PARENT AND VERIFIED BY THE SCHOOL OFFICE**

Xerox copies of the following documents Attested by a Gazetted Officer has been submitted along with the "Admission Form".

	TO BE FILLED BY PARENT		OFFICE VERIFICATION	
	Submitted	Not applicable	Submitted	Not submitted
i) Birth Certificate for admission to all classes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii) Proof of residential address (Any two) <input type="checkbox"/> Passport <input type="checkbox"/> Voter ID <input type="checkbox"/> Electricity Bill <input type="checkbox"/> Telephone bill <input type="checkbox"/> Aadhar Card <input type="checkbox"/> Ration Card <input type="checkbox"/> Rental Agreement / Sale Deed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii) Identity card , if sibling is already studying in D.A.V. Public School, Chennai	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iv) Transfer Certificate of the parent in case parent is Alumni of D.A.V.P.S.,	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v) Community Certificate in the name of Student	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vi) Graduate / Post Graduate degree of Father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mother	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vii) Proof of Hindi studied by either Father or Mother in School or College	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
viii) If employed in an Institution of Central Govt. / T.N. Govt. Defence, then attach copy of Identity card / letter from the concerned Dept. Head.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ix) Legal documents in support of ' legal guardianship ' (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
x) Legal documents in support of ' adoption ' (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
xi) Latest stamp size photo of student - pasted on the Admission Form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
xii) Latest stamp size photo of Father - pasted on the Admission Form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
xiii) Latest stamp size photo of Mother - pasted on the Admission Form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
xiv) Legal Guardian's stamp size photo - pasted on the Special Form (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
xv) Local Guardian's stamp size photo - pasted on the Special Form (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Verified by :				
			(Full Name)	

25. **DECLARATION BY THE PARENT(S)**

- a) I/We hereby declare that all information furnished in this form are true to the best of our knowledge. The Name and the Date of Birth in respect of our ward furnished by me / us in item No. 1, 2 and 5 are 'Correct' and I / We will not demand any change in it at a later date.
- b) I / We shall abide by Rules and Regulations of the School.

Signature of Legal Guardian
(if applicable)

Signature of Mother

Signature of Father

Date : _____

a. The student has qualified for admission and fees can be remitted on submission of the following documents-

1) Original Birth Certificate for admission to Pre. K.G.

2) Xerox Copy of Community Certificate of Student (if applicable)

b) **Not qualified for admission.**

Admission In-Charge (Full Name)

Principal

26. a) Fees Remitted on _____ Vide Tuition Fees Challan No. _____

Building Fund Receipt No. _____

Development Fund Receipt No. _____

i) Submitted Original Birth Certificate No. _____ Dated _____ Yes Not Applicable

ii) Submitted Copy of Community Certificate No. _____ Dated _____ Yes Not Applicable
(for admission to Std. II onwards)

27. Admission granted to Class _____ Section _____

Accountant (Full Name)

Principal

TEMPORARY ISSUE OF ORIGINAL BIRTH CERTIFICATE TO THE PARENT AFTER SEEKING ADMISSION

This is to acknowledge that I have received the Original Birth Certificate of my ward _____

Studying in Class _____ Section _____ on _____ required by me for

I shall return the same on _____ to School Office.

Issued by _____
(Full Name)

Signature of Father / Mother / Guardian / Authorised Person

Date of Return : _____

Full Name : _____

Residential Address : _____

Received by _____
(Full Name)

Pin : _____

Mobile Phone : _____