



SUBHASH ACADEMY



Senior Secondary Co-Educational English Medium School
 Farrukhabad Road, Chhikramau Kannauj (U.P) 209721

Email- subhashacademy09262@gmail.com Website- www.subhashacademycbr.com

ADMISSION FORM

S.No. _____

Date: ____/____/____

Class in which admission is sought for: _____

Session: _____

1. (a) Name of child:

(b) Gender: Male Female Transgender

2. Date of Birth:

In words: _____

3. Blood Group of the child _____

4. Aadhaar Number :

5. Do you belong to Gen./SC/ST/OBC/EWS/DISABLED/S.G child? Attach certificate tick () whichever is applicable

Gen. SC ST OBC EWS Disabled SG Child

6. Details of Parents:

Father Name:

Address: _____

Occupation: _____ Annual income: _____

Mobile No.:

Mother's Name:

7. Name & Address of local guardian (If any) : _____

8. Name & Address of the school last attended with class: _____

9. Whether last school was CBSE affiliated: _____

10. If last school was not affiliated with CBSE, specify name of the board: _____

11. (a) result of the last examination _____ (b) Percentage _____

12. Subject proposed to offer: 1. _____ 2. _____ 3. _____
 4. _____ 5. _____ 6. _____

13. Whether the transfer certificate is attached Yes/No: _____

14. Mother tongue: _____ Home Town: _____

DECLARATION BY THE PARENTS

I hereby declare that the above information including Name of Candidate, Father's/Mother's name furnished by me is correct to the best of my knowledge & belief. I shall abide by the rules of the school.

Date: ___/___/___

1. _____

2. _____

Signature of parents

For office use only

1. Certified that I have checked the application form and the relevant papers are found order.

Admission incharge

2. Please admit to class _____ section _____ after checking the relevant papers and realize the dues.

Date : _____

Principal

Admitted to class _____ section _____ fee receipt No. _____

Dated _____ issued.

Details of the amount received:

Admission fee =

Tuition fee =

Any other fee =

Computer fee =

Total =

Name has been entered in the class attendance register. Yes () No ()

Certified that all the entries have been made in the scholar's register and the dues have been received.

Registration No. of the student in admission withdrawal register is _____ volume _____

Date: ___/___/___

Office Suptd.

Admission considered by the school is in the accordance with the provisions of the board and approved.

Date

Sign. Of Principal/Official Seal