



# DELHI PUBLIC SCHOOL, KURUKSHETRA

(Under the aegis of the Delhi Public School Society, New Delhi)

Affiliated to CBSE, New Delhi (Affiliation No. : 531143)

Near Jyotisar, Pehowa Road, Kurukshetra - 136119

Mob. : 8685846661, 8685846662, 8685846665

E-mail: dpskurukshetra@gmail.com, dpskurukshetra@yahoo.in Website : www.dpskurukshetra.com

## ADMISSION FORM

(FOR OFFICE USE ONLY)

From No.....

Registration No. ....

Session : .....

### Particulars of the Student

Name in Full Master/Miss .....

(BLOCK LETTERS)

First

Middle

Last

Date of Birth .....

Year

Month

Date of the Month

Adhar Card No. ....

Detail of Brothers/Sisters Brother (s) .....

Sister (s).....

Position of the Student in the Family.....

(1st 2nd 3rd 4th)

Mother Tongue.....

Home Town.....

Nationality.....

Category (Please tick ( ) in the box)

SC  ST  OBC

Phy. Handicapped  GEN

Previous School Attended.....

Special Interest.....

### Particulars of Father/Legal Guardian

Name .....

First

Middle

Last

Educational Qualification.....

Profession/Designation or exact Nature of Business.....

Annual Income..... Official Address.....

Telephone No..... Mobile.....

Adhar Card No..... Residential Address.....

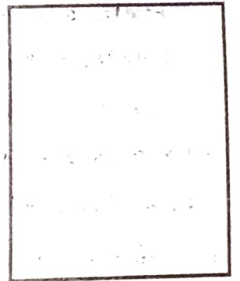
Mobile.....

Specimen Signature of Father/Mother/Guardian which would be accepted by the school authorities.

Specimen Signature

Name.....

Relation.....



1. Mother's Name.....

2. Education Qualification.....

3. Whether Working/ House Wife.....

4. If working, Name of the Office/Department.....

Designation.....

Annual Income Rs. ....

5. Adhar Card No. ....

Undersigned hereby declare that I am legal guardian or Master/Miss  
And that the information provided in this form is correct to the best of my knowledge. I have read the school rules given below and agree to  
abide them.

Signature.....  
Name.....  
Relationship with the Student.....

The transfer of the student of Delhi Public School, Kurukshetra to other Delhi Public Schools will not be possible due to change of residence  
or other circumstances whatsoever. Delhi Public School, Kurukshetra will run school buses in limited area of Kurukshetra with limited stops.  
It will not be obligatory on the part of school authorities to make new routes or extend the fees or to create additional stops. It will be the sole  
responsibility of the Parents to escort the Student to and from the fixed stop. The charges for transportation will be for twelve months.

I do understand that the philosophy of education of Delhi Public School, Kurukshetra is to lay a great deal of stress on sports and excursions,  
swimming and other co-curricular activities which involve some amount of risk. I as a Parent/Guardian will fully co-operate with the school  
in this direction and will send my ward for Tour/Excursion on my own risk and responsibility. The School will take utmost care and precautions  
for safety and security of the student during any activity of the school however the school will not be held responsible for mishappening if  
any, to the student during any activity.

In case of withdrawal of your ward from the school due to any reason there will not be any refund except caution money.

I have read and understood all the rules and regulations and shall abide by it.

Signature of the Parent/Guardian

Name in full.....

Relation.....

Admission No.....

Date.....

(For Office Use Only)

ward of.....

(Name of the Child)

(Father's Name)

Registration/Application No..... is granted admission to Class.....

for the session..... and subjects (In case of class XI).....

Date.....

Principal

### 1. Transport Department

Bus Route No..... Bus Stop..... Bus fee@Rs.....

Transport Incharge

### 2. Accounts Branch

Received fee (Caution money/Admission fee and charges as applicable)

(a) Rs..... vide receipt No..... Dated.....

(b) Entry of caution money made.

(c) Admission fee..... caution money..... Tuition fee (1st Inst.....)

Annual charges (1st Inst.....) Transportation fee (1st Inst.....)

Total Rs..... D/D No..... Date..... Bank.....

Accounts clerk

Cashier



# DELHI PUBLIC SCHOOL, KURUKSHETRA

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Affiliated to CBSE, New Delhi (Affiliation No. : 531143)

Near Jyotisar, Pehowa Road, Kurukshetra - 136119

## MEDICAL HISTORY OF THE CHILD

(Parents to note that concealing medical history of their ward may result in his/her expulsion from school)

I.....Father/Mother/Guardian  
of.....Student seeking admission of Class.....  
Registration No.....hereby confirm that my child/ward is not suffering from any of the following.

- 1. Allergy to any item/drug
- 2. Epilepsy
- 3. Bronchial Asthma/Bronchospasm
- 4. Skin Disease
- 5. Eye/ENT/ Problem
- 6. Any Major Surgery Undergone
- 7. Any other disease for which the child is on regular medication, or has been on medication for more than one month.

8. Identification Mark.....Blood Group.....

If he/she is suffering from any of the above, please provide the relevant information and details of treatment along with medical fitness certificate.

It is further certified that Master/Miss.....has been immunized against:

- 1. Vaccination for TB given on.....
- 2. Vaccination for Hepatitis B : D) Ist dose on..... ii) 2nd dose on..... iii) 3rd dose on.....

This is to certify that the above vaccines have been given under my personal supervision on the above mentioned dates.

Date.....

Place.....

Signature of Parent/Guardian

Name.....

Relation.....

## MEDICAL CERTIFICATE

(To be signed by a Registered Medical Practitioner)

(Required only if the child is suffering from any of the diseases listed above)

Certified that I have examined Master/Miss.....S/o D/o.....

and he/she is medically fit/unfit for admission to the school.

Date.....

Place.....

Medical Officer's Signature (Name with Seal)

To be submitted along with admission form to:

**DELHI PUBLIC SCHOOL, KURUKSHETRA**

Pehowa Road, Jyotisar, Kurukshetra - 136119 Haryana

Mob. 8685846661, 8685846662, 8685846665

e-mail - dpskurukshetra@gmail.com Website : www.dpskurukshetra.com

# DELHI PUBLIC SCHOOL KURUSHETRA

(UNDER THE AEGLS OF THE DELHI PUBLIC SCHOOL SOCIETY, NEW DELHI)

Affiliated to CBSE, New Delhi (Affiliation No. : 531143)

NEAR JYOTISAR, PEHOWA ROAD, KURUSHETRA - 136 119

Ph.: +91-98179 76195 | +91-98179 76200 | 01744-298230, 298260

dpskurushetra@gmail.com | www.dpskurushetra.com

## REGISTRATION FORM

Form No. \_\_\_\_\_

Registration No.: \_\_\_\_\_

REGISTRATION FOR ADMISSION TO CLASS ..... SESSION.....

1. Name of the Child (IN CAPITAL LETTERS): .....
2. Date of birth (IN FIGURES) : .....
- (IN WORDS) : .....
3. Age on 1 April, \_\_\_\_\_ : .....yrs.....moths.....days
4. Gender {Please tick (✓) in the box} : Male  Female
5. Category {Please tick ( ) in the box} : SC  ST  OBC  GEN
6. Nationality of the child : .....
7. Name of the present school : .....
8. Details pertaining to the parents

	FATHER	MOTHER
Name (In Capital letters)		
Academic Qualifications		
School Attended		
Collage Attended		
Professional Qualifications		
Occupation		
Designation		
Name of the Organization		
Office/Bussiness Address		
Tele Phone No.	Office	Office
	Mobile	Mobile
	e-mail	e-mail
Special Achievement (s), if any		

9. Home Address.....  
 Tel. No. ....Mobile.....

10. a) If Ex-student of DPS-Year Batch ..... Stream.....  
 b) Staff Child: Yes  No  c) Are you a single parent : Yes  No.

11. Details of any real Brother/Sister (not Cousin)

S. No.	Name of the Child	Brother/Sister	Class/Section	Name of the School	Admission No. (if with DPS, Kurukshetra)
i)					
ii)					
iii)					

Areas in which you can contribute to the enrichment to the school (Please tick (ü) in the box)

Cultural

Medical

Media

Professional

Sports

Academic

Whether School Bus is required (Please tick (ü) in the box):

Yes

No.

### INFORMATION

The Child should be minimum 2½ year of age as on 1st April \_\_\_\_\_ for Pre-Nursery.

The Child should be minimum 3 year of age as on 1st April \_\_\_\_\_ for Nursery.

The Child should be minimum 4 year of age as on 1st April \_\_\_\_\_ for Prep.

Kindly note that due to a limited number of seats, it will not be possible to admit to all those who apply. The application made does not, in any way, entitles the candidate to be admitted to the school.

The school provides the transport facility in the limited and pre-notified area/routes. School offer guarantee for providing the transport facility in new area or areas where full strength is not available areas where it is not festive to stop. Charges of the transport will be for 12 months.

List of short listed candidates will be displayed on the School Notice Board.

### INSTRUCTIONS

1. The registration form duly filled should be submitted at the school office between 9:00am to 3:00pm within the notified period. Incomplete forms will be rejected.
2. Please submit the following documents along with Registration Form.
  - i) A Photocopy of the Birth Certificate issued by the Municipal Corporation.
  - ii) 5 Latest Passport size Photograph of the child and the parents, duly attested.
  - iii) Proof of residence. (Photocopy of Ration Card/ telephone Bill/Passport).
3. Please keep a photocopy of duly filled registration form with you for future reference.

### CERTIFICATE FROM PARENTS

I hereby certify that to the best of my knowledge, the information given above is correct. I have read the instructions given above. I fully understand that on accepting the registration form of my child the school is not in any way obliged to grant admission. I also agree that the decision of the principal regarding admission will be final and binding on me.

Date.....

Signature of Mother

Signature of Father

### AFFIX PHOTOGRAPH HERE

Child

Latest Photo

Mother

Latest Photo

Father

Latest Photo

Submission of Registration Form does not ensure Interaction / Interview OR Admission.

Entrance Test Date \_\_\_\_\_