

EMM AAR

INTERNATIONAL SCHOOL

A Senior Secondary Institute

Affiliated to C.B.S.E., Delhi ADAMPUR (Pb.)

REGISTRATION FORM

S. No			Dated	
Please register the name of my ward for admission in your school in Class				
			Group ()	
1.	FULL NAME OF THE CHI	LD (In Block Letters)		
2.	DATE OF BIRTH			
	(Photo copy the Birth Cert	ificate to be attached)		
3.	NAME OF PREVIOUS SCHOOL & CLASS (if any)			
4.	FATHER'S NAME			
	Address			
	Mobile/Phone		Mobile/Phone	
	Occupation	Qualification	Annual Income	
5.	MOTHER'S NAME			
	Occupation	Qualification	Annual Income	
	e-mail			
6.	PARTICULARS OF BROTHERS/SISTERS OF THE CHILD STUDYING IN THIS SCHOOL			
	NAME	MECLASS		
	NAME	CLA	CLASS	
7.	SPECIAL INTERESTS/HOBBIES/GAMES (Please tick if you want to join music/skating/yoga)			
8.	ANY OTHER INFORMATION//CASTE			
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9.	PLEASE TICK IF YOU NEED BUS/BUGGI SERVICES FOR THE CHILD			
	Signature of the Parent/Guardian			
FOR OFFICE USE ONLY				
	Result of the Entrance-Te	est	_Pass/Fail	
	Remarks			