

HAPPY ENGLISH SCHOOL (NO.II)

(Recognized)

Geeta Colony, Delhi-110031

REGISTRATION FORM

Registration No.

(For Office Use Only) Registration For Class _____ Age ____:

Photograph of
Father
(Passport Size)

Photograph of
Mother
(Passport Size)

Photograph of
Student
(Passport Size)

1. Name of the Student (In Block Letters) _____

2. Date of Birth : Date Month Year

(In Words) : _____

3. Aadhaar No. of Student

4. Class in which Admission is sought _____

5. Gender : Male Female 5. SC / ST / OBC : Yes No

6. Father's Name (In Block Letters) Mr. _____

7. Mother's Name (In Block Letters) Mrs. _____

8. Residence Address _____

Delhi _____

9. Name of the School Attended
Previously with Class _____10. **Siblings (Real Brother /Sister only)** Yes No

(Tick appropriate)

If Sibling is in H.E.S., Name & Class _____

11. **School Alumni** (Tick Appropriate)
(a) Father / Grandparents Yes No (b) Mother / Grandparents Yes No Child who is Physically Challenged Yes No **Please Turn Over****IMPORTANT**

- Registration Fee is only Rs 25/-. (Non-Refundable). Registration does not mean reservation of seat.
- Application Incompletely filled in will not be entertained.
- Parents are requested to submit complete Application Form along with XEROX copy of Date of Birth Certificate issued by M.C.D. / Municipally / B.D.O. and Copy of Residence Proof. No Affidavits are accepted.
- Parents are advised not attempt to use any influence in procuring recommendation for Admission.
- Please note that "NO DONATIONS" are accepted and Admission are solely and truly offered by the School Management to the eligible Candidates based upon their performance.

12. Is the School Transportation Required Yes No
13. Father's Designation _____
14. Father's Office Address _____
 _____ Delhi _____
15. Father's Contact No. _____ Email (If Any) _____
16. Mother's Designation _____
17. Mother's Office Address _____
 _____ Delhi _____
18. Mother's Contact No. _____ Email (If Any) _____
19. Guardian's Name (If Applicable) _____
20. **Medical Information** : Does the Child have some Special Needs ?
 If Yes, give details _____
21. School Specific Parameters :
 (i) Approximate distance of residence from the School _____ kms
 (ii) Are you a Single Parent ? If Yes, Please give specific details _____

 (iii) In case the Single Parent / both Parents are working, who will look after your child at home in your absence ? _____
22. Please register my Son / Daughter / Ward named above in your School I shall produce the requisite documents at the time of Admission.

Full Signature of Father (With Date)

Full Signature of Mother (With Date)

UNDERTAKING

I _____ - _____ Father / Mother of _____ hereby declare that information given above my me is based on facts and authentic records. Admission of my Child may be cancelled, if any information is found to be false.

Signature

(Enclose Self Attested Photocopies of the Documents. Originals will be checked at the time of Admission.)

(FOR OFFICE USE)
Acknowledgement

Received complete Applicants Form of (Child's Name) _____ from Sh. / Smt. _____

List Declaration on ___/___/_____ or Kindly bring your Child for Test on ___/___/_____ at ___:___ A.M./P.M.

Reg.No. _____

_____ **Admission Incharge**