ESTD. 1954

Last Date of Submission _____/20__

11-35595662,22411111 www.hesgc.com



HAPPY ENGLISH SCHOOL (No.11)

ECOGNIZED)

হি ।	क्षा ध्येय हमारा	GEETA COLONY, I	DELHI-1100	31
gistra	ation No	REGISTRATION FO	DRM	(For Office Use only)
			Registration	for ClassAge:_
	PHOTOGRAPH FATHER (Passport Size)	PHOTOGRAPH MOTHER (Passport Size)		PHOTOGRAPH CHILD (Passport Size)
1.	Name of the Student (In Block Letters)			
2.	Date of Birth: Date Month Year (In words):			
3.	Aadhar No. of Student			
٠.	Class for which admission is sought			
5.		Letters) Mr	SC/ST/OBC:	
3.				
).	Mother's Name (In Block Letters) Mrs			
				Delhi-1100
0.	Name of School Attended Previously with class			
1.	Siblings (Real Brother/S	ister only) Yes	No	
2.	(if Sibling is in HES Name and Class_ School Alumini (Tick Appro	adata))
	(a) Father / Grandparents	Yes	No	
	(b) Mother/Grandparents	Yes	No 🗍	
	Child who is Physically Challe	nged Yes	No	(Please Turnov

IMPORTANT ==

- 1. Registration Fee is only Rs. 25/- (Non-Refundable). Registration does not mean reservation of seat.
- 2. Application Incompletely filled in will not be entertained.
- 3. Parents are requested to submit complete application form along with XEROX copy of Date of Birth Certificate issued by M.C.D./Municipality/B.D.O. and Copy of Residence Proof No. affidavit are accepted.
- 4. Parents are advised not attempt to use any influence in procuring recommendation for Admission.
- 5. Please note that "No Donations" are accepted and Admission are solely and truely 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 AddressDelhi				
	Email (if any)				
15.	Father's Contact No.				
16.	Mother's Designation				
17.	Mother's Office AddressDelhi				
	Email (if any)				
18.	Mother's Contact No.				
19.	Guardian's Name (If Applicable)				
20.	O. Medical Information: Does the Child have some Special Needs?				
	If Yes, give details				
21.					
	(i) Approximate distance of residence from the schoolkms.				
	(ii) Are you a Single Parent? If Yes, Please give specific details				
	(iii) In case the single Parents / 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 the				
	documents at the time of admission.				
	Full Signature of Father (with Date) Full Signature of Mother (with Date)				
	Full Signature of Father (with Date) Full Signature of Mother (with Date) Undertaking				
	IFather/Mother of				
	hereby declare that information given above by 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				
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//20at:A.M./P.M.					
Reg. N	o Admission Incharge				