

RAO MANSA RAM PUBLIC SCHOOL

Near Oberoi Farm, Kapashera, New Delhi Jai Vihar, Baprola (Najafgarh-Nangloi Road), New Delhi-110043 Ph. 011 - 25061091

CBSE Aff. No. - 3530107

Photograph of the student INFORMATION ABOUT	UT STUDENT	Photograph of the fath	ıer	Photograph of the mother	
Name of the student (In be First Name	лоск іепег)	Middle Name	Last Name		
Date Of Birth	Aadhar No.		Gender		
B		Addid No.	Gender		
Admission- Old New New					
(a) Age as an 1st April of the	Academic Year: Day Mo	onth year (Month)	(Year)		
(PHOTOCOPY OF BIRTH CERTIFICATE OF M.C.D/T.C. TO BE ENCLOSED) Father's Name Mother's Name					
Sibling Status(if					
Present Address					
Nationality		Religior	1		
Category-Gen.	OBC SC/S	ST	Caste Category		
Contact No.	OBC SC/ST Caste Category Landline with area				
E mail ID					
Correspondence address					
	B				
Name of the last attended	I school with	PREVIOUS ACADEMIC I	RECORD		
Class/Grade		Class N	larks Obtained		

OTHER DETAILS

Father's educational qualification					
Father's occupation	Aadhar No				
Mother's educational qualification					
Mother's occupation	Aadhar No				
FOR TRANSPORT	REQUIREMENT				
Name of the					
Residential address					
Contact No.					
(Please keep the school informed of the changes in the address and contact Numbers	3)				
From where you go to know about our school?					
By word of month Through Newspaper					
Our website Any other source					
Why did you choose our School?					
<u>-</u>					
DECLARATION OF THE FATH	HER/MOTHER/GUARDIAN				
I Hereby certify that the information given in the registration from by me is accurate and complete. I understand and agree that mis representation or omission of facts will lead to denial and cancellation of admission or expulsion. I have read and hereby agree to the Terms and Conditions enclosed with the registration form					
Signature of the Father/Mother/Guardian					
Date://					
ote: Colored Photo-3, Aadhar Card Photocopy-2, Marksheet Photocopy-2,	Transfer Certificate- Original.				
*					
application received for					
FOR OFFICE L	JSE ONLY				
Application No.					
Name of the student					
application received forclass					
Date	Signature				