

GAJADHAR SINGH ANGAD SINGH ACADEMY HARRAIYA BASTI (UP)

For Office Use Only

Scholar's Register No.....

Adm. File & Form No.....

T.C. File No.....

Date of Admission.....

Clerk's Signature.....

..... Campus



ADMISSION FORM

Latest passport size
photograph of the
student

To be filled in by the Parent/Guardian (in BLOCK CAPITAL LETTERS)

1. Name of student: First Name Last Name
2. Date of birth: (in DD/MM/YYYY format) Sex: M/F Place of Birth.....
3. Birth Certificate from municipality / panchayat / hospital: (Please attach attested photo-copy)
4. Admission sought in class:
5. Email of the student:
6. Father's name and qualification: Mob. No.
7. Mother's name and qualification: Mob. No.
8. Email of Parent/Guardian:
9. Religion: Caste: Category: General / SC / ST / OBC / BPL:
(Please strike off whichever is not applicable)
10. Full residential address:
.....
Telephone (Res.): (Off.): Mobile No:
11. Father's occupation/designation (give specific details):
Monthly income: Organisation where working:
12. Mother's occupation/designation (give specific details):
Monthly income: Organisation where working:
13. Name of local guardian, if any, with full address & relationship:
.....Tel. No: Mobile No:
14. Name of the last school attended:
.....(attach Original Transfer Certificate)
15. Medium of instruction in last school
16. Last examination passed: Class: Year: Percentage:
17. Percentage of marks obtained in the last examination (attach mark-sheet of Half Yrly/Annual):
(1) English..... (2) Maths..... (3) Hindi..... (4) Computer.....
(5) Science..... (6) Biology..... (7) Social Studies.....

P.T.O.

18. Total aggregate percentage:

19. Subjects opted for (for classes IX & XI):

1. 2.
3. 4.
5. 6.

20. Do you require school transport? Yes/No: (Strike off whichever not applicable)

(1) I have read the School Prospectus carefully and I promise to abide by the rules mentioned therein and also any other rules and instructions issued by the school from time to time.

(2) I note that the fees once paid to the school is not refundable under any circumstances.

Date

Signature of Parent/Guardian.....

Please (1) Transfer Certificate and two passport size photographs with name of the child written at the back.

Enclose: (2) Proof of Date of Birth (certificate issued by Hospital/Municipal Corporation/Panchayat)

(3) SC/ST/OBC/BPL Certificate.

TO BE FILLED IN BY THE SUBJECT TEACHERS

Subject	Percentage of marks	Teacher's name	Fit for class	Signature	Remarks
English					
Maths					
Science					
Hindi					

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Name of student:

Student admitted in: Class: Section:

Total amount realised at the time of admission: Rs.

- (1) Monthly fees: Rs. (2) Computer fees: Rs.
(3) Bus/Rickshaw fees: Rs. (4) Admission fees: Rs.
(5) Annual fees: Rs. (6) Others: Rs.

Class Teacher Date..... Principal.....

Please submit this form along with Cash of Rs. 100/- at the GSAS campus where you seek admission for your ward.