

Total Marks:

Result: Pass / Fail / Compartment:

Sri Guru Harkrishan Sr. Sec. Public School

Sector 40-C, Chandigarh





ADMISSION FORM

		(Eas C	Place XI and	l VII Studon	ts Only		· —— • ·	
1 Name of stud	lent in full (•		l XII Studen:	•	MALE	FE	MALE)
2. Date of Rirth	(In Figure)	Capital Let	(In Wor	ds)				WALE)
2.	(III I Iguic) _ ame		(III WOI	us)				
b) Mother's N	Inne Jame						┨	
								aste Latest
+. <i>a)</i> 1 1030111 7 ta	dress of Tat	ner / Guarai	un					ssport Size
b) Permanent	Address of F	Father / Mot	her / Guardian _				P	hotograph Here
c) Aadhar link	ed Contact N	Number (if	any) Personal	(Of	fice / Shop)		_	
5 Father's Profe	ecion	vuilloci (ii	any / 1 crsonar _	Mother's Prof	ession			
5. Pauler's 11010 6. Nationality	2551011			Religion	CSS1011			
				Kengion Disability (PWD)			C C	CT.
				UID No.)				
Class Last Atte	admission is	a sought	Aaumaai (OID No.)				
Class to willen	duillissioii is	s sought	ma(s)/Class 1		2		2	
				s who opted stand			_ 3	
SUBJECT (2 OPTIONS:	Standard M (Pl. Tick v	ath (who opted	ho opted Basic or Standard Math i	in class X)			
MEDICAL			DICAL ()	COMMERCE	,	HUMA		,
English (Core)		English (Core)					English (Core)	
Physical Edu	ıcation*	Physical Education*		_		Physical Education*		
Physics		Physics		2		History		
Chemistry		Chemistry		3		Political Science		
Biology		Maths		Economics			Economics / Punjabi/ Hindi	
*Ph	ysical Educa	ation / IT / N	Marketing / Heal	th Care / Mass M	edia / Yoga / I	Legal Stud	dies / M	usic
9. E – Mail ID _					Blood C	Group		
10. Annual Incor	ne:							
11.Only Child: (Yes / No)		12. Wheth	er Belongs to Mir	ority Group (Yes / No)		
13. Distinction i	n Games / a	ny other fic	eld:					
14. Record of 10	th Class:							
Class X	Year of	Name of	Subject	For Candidates	For candida	ites		School /
Roll No.	Passing	Board	Offered	who have	who have pa	ssed		Institute
				passed X from	X class fro	m M.	.Marks	Previously
				CBSE	other than Cl	BSE		Studied
				Grade Point	Marks Obtai	ned		
				1				
				-				

45 PEN (P	1 DVI 1 D 1	ARAARAYO
15. PEN (Permanent Education No.) 16. Children with Special Needs: (Applicable		
b) If any Medical Certificate / Disabilit	ty Certificate issued from Govt. I	Hospital (Yes / No)
c) Percentage of Disability		1 ,
d) Last school attended		
I) Special School / Inclusive School		
II) Inclusive School without Special		
Name of the School		
Medium of Instructions in the school	l last attended	English / Hindi / Punjabi / Others
Any Special medical information ab	out Child (Yes / No)	If Yes, then mention / write below:
17. List of Testimonials / Certificates/	Doguments to be Attached (So	If Attacted Capies Only):
		ficate d) SC/ST/OBC/Physically Challenged/
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	adhaar UID No.(Student, Father and Mother)
		Institution last Attended h) Two Passport
		her:
18. Strength : i) Participation in Co-Curr	icular Activities	
ii) Participation in Extra Co	o-Curricular Activities	
, •		
19. Medical History (If Any):		
 The amount once deposited at the 	e time of admission is non-refur	ıdable.
 The admission is entirely provision 	onal (Till the submission of clas	s X Board Result)
	STUDENT DECLARATION	
the school and Board and not to associate myse with the permission of my parents / guardian. I admitted to any affiliated school in the class to	If with any activity that goes against the considerable solution of solutions of solutions of solutions of solutions of solutions and solutions of solutions and solutions are solutions. I will ayground, work place, outings and on	ospectus. I pledge to follow rules and regulations of discipline of the institution. I am joining the school ed above are true and that I have not so far been not hold the school responsible for any accident the way. Any damage to school property by me,
Dated		re of Student
		````
	PARENT DECLARETION	
I hereby declare that I have noted		
I agree to abide by the Rules and R	C	<u> </u>
Advance on the prescribed dates. I nature in the school, workshop, play	-	· ·
nature in the school, workshop, play	ground, work place, outlings on	the way.
		Signature of Parent / Guardian
	FOR OFFICE USE ONLY	
Date of Admission	Admission	n No
		otted
Receipt No. for payment of fees	Date	ed

Date :_

Principal

#### FOR CLASS TEACHER

1. Name of student in full (Capital )	Letters)	(MAI	LEFEMALE_	
2. Date of Birth (In Figure)	( In Words)			
3. a) Father's Name				
b) Mother's Name			Paste Latest Passport Size	
4. a) Present / Office Address of Fath	ner / Guardian		Photograph Here	
b) Permanent Address of Father / M	Iother / Guardian			
c) Contact Number ( if any ) Person	al	( Office / Shop )		
5. Father's Profession	Mother's Pro	Mother's Profession		
6. Nationality	Religion			
Category ( Pl. Tick ✓) General	Person With Disability (PWD)	OBC	SCST	
Class Last Attended	Aadhaar ( UID No. )			
Class to which admission is sought				
7. Any sibling studying in the school:	Name(s)/Class – 1	2	3	
8. E-mail:	Annual Income:	Mino:	rity (Yes / No)	
9.Blood Group	Only Child ( Yes / No )			
0. Class X Board Roll No	Year of Passing	F	Percentage (%)	
11. Date of Admission	Admissic	on No		
12.Class to which Admitted	Strean			
13.Subjects Opted:				
14.Receipt No. for Payment of fees				

# ✓ Check List of Testimonials / Certificates / Documents to be Attached (Self Attested Copies Only)

- a) Date of Birth Certificate
- b) SSC / Matriculation Certificate
- c) Transfer Certificate
- d) SC / ST / OBC / Physically Challenged / Divyang Certificate issued by any Govt. Hospital / Authority
- e) Aadhaar Card (UID No.)
- f) Residence Proof
- g) Character Certificate from the Head of the Institution last Attended
- h) Two Passport Size Latest and Colored Photographs
- i) Scouts and Guides / NCC Certificate ( If Any )
- j) Income Certificate in case of Minority Group