



# Shivalik Public School

(Affiliated to Central Board of Secondary Education, New Delhi)

Affiliation No. 1630022, School No. 20039

Phase - VI, S.A.S. Nagar, Mohali

shivalik6mohali@gmail.com

Tel. No. : 2225486

## REGISTRATION FORM FOR DAY SCHOLAR

(Issue of Registration Form does not ensure Admission)

Session: 20 - 20

Branch.....

Registration No. ....

Dated ...../...../.....

### Admission Sought to Class .....

1. Student's Name (Block Letters) \_\_\_\_\_

2. Gender (Please Tick): Male  Female

3. Date of Birth

(In Words) \_\_\_\_\_

(Please attach photocopy of Birth Certificate of the child)

Please paste  
a recent  
passport  
size photograph  
of the child

4. Nationality of the child \_\_\_\_\_ Religion \_\_\_\_\_ Mother Tongue \_\_\_\_\_

5. Category (Please Tick): SC  ST  OBC  General

6. Permanent Address : \_\_\_\_\_

\_\_\_\_\_ Tel No. \_\_\_\_\_

7. Local Address : \_\_\_\_\_

\_\_\_\_\_ Tel No. \_\_\_\_\_

8. (a) Name of the school last attended \_\_\_\_\_

(b) Present class of the Student \_\_\_\_\_

(c) Name of the Previous Education Board \_\_\_\_\_

(d) Medium of Instruction in Previous School \_\_\_\_\_

(e) Whether the Previous School was recognized: Yes  No

9. Father's Name (Block Letters) \_\_\_\_\_

Educational Qualification & Occupation \_\_\_\_\_

Office Address \_\_\_\_\_

\_\_\_\_\_ Monthly Income \_\_\_\_\_

e-mail i. d. : \_\_\_\_\_ Mobile No. \_\_\_\_\_

10. Mother's Name (Block Letters) \_\_\_\_\_

Office Address \_\_\_\_\_

\_\_\_\_\_ Monthly Income \_\_\_\_\_

e-mail i. d. : \_\_\_\_\_ Mobile No. \_\_\_\_\_

11. Guardian's Name (Block Letters) \_\_\_\_\_

(only in case of students under Guardianship)

Residential Address : \_\_\_\_\_

\_\_\_\_\_

e-mail i. d. : \_\_\_\_\_ Mobile No. \_\_\_\_\_

12. If any siblings (real brothers/sisters) already studying in Shivalik Public School, Mohali

Name \_\_\_\_\_ Admn. No. \_\_\_\_\_ Class \_\_\_\_\_

Name \_\_\_\_\_ Admn. No. \_\_\_\_\_ Class \_\_\_\_\_

I/We hereby certify that the above information is correct to the best of my/our knowledge and belief.

The registration fee of **Rs.200/-** (Non-refundable/Non-transferable) is paid herewith and I understand fully that the fee for registration does not guarantee admission of my child.

\_\_\_\_\_  
Father's Signature

\_\_\_\_\_  
Mother's Signature

\_\_\_\_\_  
Guardian's Signature

Date : \_\_\_\_\_

Place : \_\_\_\_\_