



# FATHERSON SENIOR SECONDARY PUBLIC SCHOOL

Affiliation No. 2130322 School No. 81101  
BIJNOR ROAD, CHANDPUR SIAU (BIJNOR)  
(M) +91 8923048444, 9811575687  
E-mail: fathersonpublicschool09068@gmail.com

## ADMISSION FORM

Passport Size  
Photograph  
of the Student

1. Class in which admission is sought for ..... Session.....

(a) Name of the Child in full (in capital letters) .....

(b) Sex

Male

Female

2. Date of Birth

Day

Month

Year

In words .....

Age of the student as on 31<sup>st</sup> March Year Month Day

3. Blood Group of the child.....

4. Do you belong to Gen./SC/ST/OBC/EWS/Disabled/S.G. Child? attach certificate

Gen. Cat.

SC

ST

OBC

EWS

Disabled

SG

Child

5. Details of parents:-

Details of Mother/Father	Mother	Father
(i) Name (in capital letters)		
(ii) Nationality & Occupation		
(iii) Name of office & full address with Telephone No.		
(iv) Full residential address with tele. no.		
Annual Income		

6. Particulars of siblings, if students of FATHERSON SENIOR SECONDARY PUBLIC SCHOOL

S. No.	Name of Sibling	Class	S.R. No.
1.			
2.			
3.			

7. Name & address of local guardian (if any).....

8. Name & Address of the School last attended with class.....

9. Whether last School was CBSE affiliated.....

10. If, The last school was not affiliated with CBSE, specify name of the Board.....



11. (a) Result of last examination ..... (b) Percent.....
12. Subject proposed to offer (XI only) : 1..... 2..... 3..... 4.....  
5 ..... 6.....
13. Whether the transfer certificate is attached Yes/No..... Date of T.C. ....
14. Mother tongue..... Home Town.....

**DECLARATION BY THE PARENTS**

As a guardian / parent of my ward I declare that I am fully aware of the school fee and allied charges. I further assert that the school fee and all allied charges are well known to me, there is no hidden charge of any sort. Hence, I am willingly and awarery paying the above mentioned fees & charges to the school.

I hereby declare that the above information furnished by me is correct to the best of my knowledge & belief .  
I shall abide by the rules of School.

Date ..... Signature of parents .....

**INDEMNITY BOND**

Sir,  
In regard of my ward ..... I fully understand that the School authorities will not be liable for any damage whatsoever on account of injuries, fatal or otherwise, which may be sustained at any time during his/her stay in the school or while taking part in Sports, Athletics or in any other extracurricular activity inside or outside of the school or during commuting by school bus, educational tours, excursions and camps.

Signature of father : ..... Signature of Mother : .....  
Name of Father : ..... Name of Mother : .....  
Date: ..... Date: .....

**FOR OFFICE USE ONLY**

Admission No. Allotted : ..... Session : .....  
Date of Admission : ..... Class : ..... Section: ..... House : .....  
Staff ward : Yes  No  Details of fee concession, if any : ..... Sign. of In-Charge: .....

**Principal's Remarks**

Admitted to class : ..... Conditional Admission to Class: ..... Sign. of the Principal : .....