



Indirapuram

PUBLIC SCHOOL

C-BLOCK, SECTOR-12, PRATAP VIHAR, GHAZIABAD (U.P.)
(AFFILIATED TO C.B.S.E. 2130937, SCHOOL NO. 54412)

REGISTRATION / ADMISSION

FOR ACADEMIC SESSION 20 - 20

IMPORTANT INSTRUCTIONS

1. Only parents should fill up and sign the Application/Registration form. In case this form is filled in by the guardians, then it should be stated clearly on the form or the application may stand cancelled.
2. Parents must go through the prospectus carefully before filling in the form.
3. Parents should take utmost care to tally the name and date of birth as given in the application form with the date of birth as given in the original birth certificate and/or transfer certificate.
4. Attested copies of the following documents should be enclosed with the filled in application forms failing which admission may be considered invalid.
 - (a) Birth Certificate (Photocopy attested at the time of registration and the original at the time of admission for all classes)
 - (b) Previous Year's Marks Sheet for class II onwards.
 - (c) Transfer Certificate (Original at the time of admission for class II onwards)
 - (d) Medical certificate (from a registered medical practitioner if suffering from any chronic ailment or medical problem.)
5. No admission will be deemed to be complete and valid till the above documents are submitted.
6. An application will be summarily rejected if any discrepancy between the particulars given in the form and supporting documents are detected.
7. The application form is not transferable.
8. Acceptance of admission fee is not a guarantee of admission. The admission shall remain provisional until all the documents are verified and found to be correct by the school authorities.

APTITUDE TEST / INTERVIEW / COUNSELLING WITH THE PARENTS

- ◆ For all other classes i.e., from Class I onwards formal written test is conducted in languages (English & Hindi), Maths and General Awareness to check the lingual proficiency, mathematical ability and general knowledge respectively of the candidates. For classes VI onwards test is taken for English, Hindi, Science & Maths.

AGE CRITERIA

- ◆ The basic age criteria for admission to be met according to the birth certificates issued by the Municipal Corporation or any competent authority and as given hereunder.

Class	Minimum as on 31st March
L.K.G.	3 Yrs. 3 months
U.K.G.	4 Yrs. 3 months
Class I	5 Yrs. 3 months and so forth



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Form No. :

APPLICATION FORM FOR REGISTRATION/ADMISSION FOR ACADEMIC SESSION 20 -20

To
The Principal
Indirapuram Public School
Pratap Vihar, Ghaziabad

Adm No.

Regn. No.

Date:

Affix
Photograph
of student

Please admit/register my son/daughter/ward in class.....for the year 200 - 200

1. Child's Name (in Block Letters): Sex:

2. Date of Birth: Place of Birth: Mother Tongue:

3. Nationality: Whether member of Scheduled Caste or Tribe :
Yes/No. (If Yes, attach proof)

4. Details of Father: Name:..... Age:..... Qualification :..... Occupation :..... Designation:..... Approx. Annual Income : Rs.:..... Complete address of place of work : Phone/Mobile E-mail.....	5. Details of Mother: Name :..... Age:..... Qualification:..... Occupation:..... Designation :..... Approx. Annual Income: Rs.:..... Complete address of place of work: Phone/Mobile..... E-mail.....
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6. Residential Address :
.....
Phone Mobile :.....

7. Last School Attended :
Class:..... Percentage of Marks/Grades.....

8. Details of Child's Brother & Sisters	Name	Age	Education, including name of present School

I certify that the above particulars given by me are true. I have read and understood all the rules & regulations of the school and I agree to abide by the rules of the school.

Date:

Yours faithfully,
Parent/Guardian

FOR OFFICE USE

Form No.....

(Seal of the School)

Regn. No.....

Registered/Admitted to Class.....on.....

Admn. Receipt No.....

Principal

(Seal)



Indirapuram

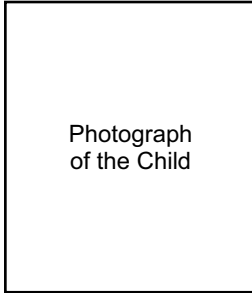
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Form No.

APTITUDE TEST/INTERVIEW CARD FOR THE SESSION 20 -20

SCHOOL'S COPY



Photograph
of the Child

FORM NO.

REGN. NO.

DATE :

Name of student :

Father's Name :

Address :

Class in which admission is sought:.....

Remarks:.....

Date of Admission Test:..... Time:.....

Venue:.....

NO CANDIDATE WILL BE ALLOWED FOR INTERACTION TEST/INTERVIEW WITHOUT THIS CARD

(Signature of Parents)

Signature
(Seal of the School)



Indirapuram

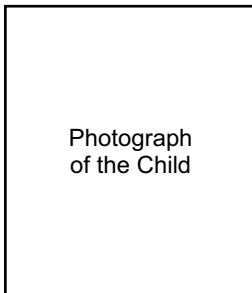
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Form No.

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PARENTS' COPY



Photograph
of the Child

FORM NO.

REGN. NO.

DATE :

Name of student :

Father's Name :

Address :

Class in which admission is sought:.....

Remarks:.....

Date of Admission Test:..... Time:.....

Venue:.....

NO CANDIDATE WILL BE ALLOWED FOR INTERACTION TEST/INTERVIEW WITHOUT THIS CARD

(Signature of Parents)

Signature
(Seal of the School)

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