

# St. JOHN'S SCHOOL

(PRE-PRIMARY) FULLY AIR CONDITIONED

Ward 1, Mehrauli, New Delhi-110030 Ph. : 011-2664427, 26641398



saras**Smart**  
e-digital classrooms

## REGISTRATION FORM

Incomplete Form Will Not Be Processed

Form No. \_\_\_\_\_

Date of Issue [ ][ ] [ ][ ] [ ][ ][ ][ ]

Last date of Submitting the form in the school [ ][ ] [ ][ ] [ ][ ][ ][ ]

Registration for class [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

Paste  
Passport size  
photograph  
of the child

### READ THE FOLLOWING INSTRUCTIONS CAREFULLY BEFORE FILLING UP THE FORM.

- Fill all the particulars in block letters.
- Do not leave any column blank.
- Tick the correct option where ever provided.
- Fill up correct telephone nos. with STD/area code.

#### **A. CHILD'S DETAILS :**

##### **NAME :**

FIRST NAME

MIDDLE NAME

SURNAME

**DATE OF BIRTH :** DAY [ ][ ] MONTH [ ][ ] YEAR [ ][ ] [ ][ ] **GENDER :** MALE  FEMALE

#### **B. PRESENT ADDRESS :**

CITY

STATE

PIN CODE

**LANDLINE** (COUNTRY CODE-STD CODE)

**MOBILE (FATHER):**

**MOBILE (MOTHER):**

**E-MAIL:**

#### **C. PERMANENT ADDRESS/HOMETOWN :**

CITY

STATE

PIN CODE

**D. DISTANCE OF RESIDENCE FROM THE SCHOOL IN KM :** 0-1  1-2  2-3  3-6  6-8  MORE THAN 8

**E. FATHER'S DETAILS :**

FIRST NAME										MIDDLE NAME										SURNAME									
NAME :																													

QUALIFICATIONS:	HIGH SCHOOL	GRADUATE	POST GRADUATE	ANY OTHER, SPECIFY
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NATURE OF PROFESSION:

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IS FATHER RESIDING IN INDIA?										DELHI										IF NOT, RESIDING AT - CITY, STATE & COUNTRY									
YES	NO	YES	NO																										

OCCUPATION :	BUSINESS	SELF EMPLOYED	GOVT. SERVICE	PRIVATE SERVICE
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POST HELD/designation :

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NAME OF COMPANY/BUSINESS/ORGANISATION

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OFFICE ADDRESS :


CITY										STATE										PIN CODE									

LANDLINE (COUNTRY CODE-STD CODE)															MOBILE:														

**F. MOTHER'S DETAILS :**

FIRST NAME										MIDDLE NAME										SURNAME									
NAME :																													

QUALIFICATIONS:	HIGH SCHOOL	GRADUATE	POST GRADUATE	ANY OTHER, SPECIFY
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NATURE OF PROFESSION:

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IS MOTHER RESIDING IN INDIA?										DELHI										IF NOT, RESIDING AT - CITY, STATE & COUNTRY									
YES	NO	YES	NO																										

OCCUPATION :	BUSINESS	SELF EMPLOYED	GOVT. SERVICE	PRIVATE SERVICE	HOUSE WIFE
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POST HELD :

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NAME OF COMPANY/BUSINESS/ORGANISATION

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OFFICE ADDRESS :


CITY										STATE										PIN CODE									

LANDLINE (COUNTRY CODE-STD CODE)															MOBILE:														



## UNDERTAKING

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- 1 I hereby declare that all information submitted by me in this form is true to the best of my knowledge and nothing has been concealed therefrom.
2. I undertake to abide by the rules and regulations of the school including those modified from time to time. I will fully cooperate with the school authorities and the management and will never get involved in any activity which is against the interest of the institution.
3. I undertake full financial responsibility of the child and will be personally responsible for payments of all his/her school dues in time.

**Dated** \_\_\_\_\_ **New Delhi**

**Documents to be enclosed :**

1. Copy of Date of Birth Certificate
2. Copy of Address Proof

**Signatures of Mother/Father/Guardian**

1. Date & Time of the Written Test / Counselling / Orientation : \_\_\_\_\_

2. Date & Time of Admission : \_\_\_\_\_

**RESULTS :**

**English**

**Hindi**

**Maths**

**Science**

**RECOMMENDATION :**

**Signature of dealing assistant**