



Form No:-

Admission Number.....

(To be filled by the office)

PRINCIPAL'S

SIGNATURE

ASSEMBLY OF GOD SCHOOL OF EDUCATION

AFFILIATED TO C.B.S.E. , NEW DELHI

A SENIOR SECONDARY SCHOOL (10+2 level)

SAKARI, ARWAL (BIHAR)-804401

MOB. NO.:- 9113115076, E-mail ID- agseschool@gmail.com

REGISTRATION CUM ADMISSION FORM

FOR CLASS-___(202 -)

APPIX A
PASSPORT SIZE
picture

Dear Sir,

Please register the name of my son/daughter/ward for admission to the school as a Day Scholar.

1. Name in Full.....
2. Date of Birth.....(in figures)(in words)
3. Age on(01/04/.....):-
4. a) Name of the Previous school attended.....
b) Class last attended..... C) Medium of instruction in the previous school.....
5. a) Father's Name.....
b) Qualification..... c) Profession.....
6. a) Mother's Name.....
b) Qualification..... c) Profession.....
7. Monthly Income from all sources.....
8. From where you have got information for admission:-
Holding Parents Friends Campaigning Student Others

Receiving cum Admit Card

APPIX A
PASSPORT SIZE
picture

Form No.....

Name of the student.....

Father's Name:-..... Mother's Name:-

For admission in standard..... Date of Birth..... Sex:-.....

Mailing Address:

Date of Admission Test.....

Signature of receiving clerk

Principal's signature

8. Permanent Address
.....
.....

9. Correspondence Address.....
.....
.....

10. Mobile No. _____ / _____

DECLARATION

I have read the rules and regulations of the school as given in the prospectus. The statement made here are, to the best of my belief and knowledge CORRECT. If facts stated above are found INCORRECT at any stage, my son/daughter/ward will forfeit his/her admission from the school. I shall co-operate with the school management in every respect according to the rules regulations of the school or such other rules and regulation as may be framed from time to time. I do hereby identify the school management and its staff against any claims arising through illness, accident or any other cause. The school management and its staff will not be liable for any damage/charges/ compensation on account of injuries fatal or otherwise which may be sustained by the student any time while coming to school whether taking part in academics/sports/ martial arts/ physical training/excursion/tours extracurricular or any other form of activities of school within or outside to school premises. All expense that may be incurred in the treatment of such injuries will be borne by the parent/guardian. In all the matters, the decision of the Administrator/ Manager/Principal will be final and binding.

Date:-

Signature of Parent/ Guardian

Specimen signature of parent/ guardian

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