

Registration Fee Received.....
Admission Test Fee Received.....

Registration No.....

BIRLA PUBLIC SCHOOL



(VIDYA NIKETAN)
PILANI- 333 031 (RAJ.)
01596-242132,242089, Fax 245502

Photograph

REGISTRATION FORM

1. Student's Name (In Capital Letters)														2. Admission sought to class	
3. a.) Date of Birth (in figures)										(Birth Certificate from Municipality or Transfer Certificate must accompany this form)					
b) Date of Birth (in words)															
4. Nationality										Status : SC/ST/OBC/Gen. Category.....					
5. Father's Name															
6. Profession/ Designation				7. Monthly income from all Sources											
8. Mother's Name										Profession					
9.(a) Name of previous school attended with dates															
(b) Class in which studying at present															
(Please enclose copy of last year's promotion certificate with Marks/ Grades obtained)															
(c) Position attained in the last examination in the previous schoolout of..... students.															
(d) Medium of instruction in the previous school										(English/Hindi)					
(e) Proficiency in games															
10. Name and class of any real brother studying in the school															
11. Please mention if the student has applied for admission earlier. If so, please mention year and class															
12. Correspondence Address															
----- ----- -----															
Email:															
Telephone Nos:				Res :				Office:				Cell:			
13. Person to be contacted (in case of emergency)				Name..... Address..... Tel No: Off.....Res.....Cell											

- 14.** The Registration fee of Rs. 1900/-(Non refundable) is paid herewith and I understand fully that the School on accepting this fee and on registering his name, is in no way bound to admit him. The admission will be given only when a suitable vacancy arises and if the student is found fit for admission to the school.
- 15.** It would be my responsibility to ensure that my son/ward conforms to age rules for admission as mentioned in the Prospectus. My ward will be denied admission or he will be asked to withdraw if he is over-age or his age is found to be wrong at any stage.
- 16.** Registration Form of my ward will stand rejected if it is incomplete in any way and no correspondence will be made my me in this regard.
- 17.** A Draft of Rs. 1900/= as Registration fee in favour of Principal Birla Public School drawn on UCo Bank / SBBJ/SBI payable at Pilani is enclosed herewith. In case form is downloaded additional Rs. 200/- is to be remitted along with the registration fee. Rs. 1900 + Rs. 200 = Rs. 2100
I certify that the above information is correct.

Signature of Parent

(Father or Mother)

Date.....

MEDICAL CERTIFICATE

Certified that.....S/o.....is free from any constitutional and hereditary disease or infirmity. I further certify that the boy is not subject to any deformity or mental defect and such troubles as insomnia or sleep walking, fits or convulsion, lung trouble, epilepsy, asthma, tonsillitis and bed-wetting.

Details of any major surgical operation undergone and any allergy

Details of medicines being taken

Date.....

Place.....

Signature

Seal

(Registered Medical Practitioner with qualifications not lower than M.B.B.S.)



Note: To be produced at the time of the Test

**BIRLA PUBLIC SCHOOL, PILANI (RAJ.)
ID CARD FOR ADMISSION TEST**

Form No.

Name.....Father's Name.....

Date of Birth.....Admission sought for class.....year.....

Address.....

Photograph

For Office use only

R.No..... Dt.....

Receipt No..... Dt.....

Signature

Date.....

Centre.....