



# OXFORD PUBLIC SCHOOL

SENIOR SECONDARY (Affiliated to C.B.S.E.) 2730530

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PHOTO

## REGISTRATION FORM

S. No. **413**

REG. No. ....

Date : ...../...../.....

1. Name of the Child : .....  
Aadhar No. : .....
2. Mother's Name : .....  
Aadhar No. : .....
3. Father's Name : .....  
Aadhar No. : .....
4. (a) Date of Birth\* : Day   Month   Year      
(b) Date of Birth (in words) : .....
5. Age as on 31.03.20 : .....  
(in words) : .....
6. Class in which admission is sought : ..... Gender M/F ☐
7. Blood Group : ..... Mother Tongue : .....
8. Guardian's Name : .....  
(if applicable)  
Aadhar No. : .....
9. Profession of the Parents : Mother : ..... Father : .....
10. Phone No. of the Parents / Guardian  
(a) Mobile            
(b) Residence
11. Current Residential Address\*\* : .....  
.....  
.....
12. School Transport required : Y/N ☐ Parents Annual Income : .....
13. Previous year school result & percentage : .....
14. Child without parental support\*\*\* : Y/N ☐ Whether the student belongs to SC/ST/OBC/Gen\*\*\*\* : .....
15. Any Medical Ailment (Attach Copy) Y/N ☐

## SIBLINGS STUDYING IN THE SCHOOL

Name : .....

Class : .....

Name : .....

Class : .....

FATHER

Affix Recent Photographs

MOTHER

## DECLARATION BY THE PARENTS

I ..... (Name) Father / Mother  
of ..... (name of the child) hereby declare that the information given above is  
true and correct to the best of my knowledge and belief. I have read and understood all the provisions of the  
notification in this regard. In case any information is found false or incorrect on verification, the admission of my ward  
may be cancelled.

Dated : .....

Signature of the Parent

## FOR OFFICE USE

Class : ..... Admission No. : .....

Date of Admission : ..... Fee Receipt No. : .....

Principal's Signature  
P.T.O.