



ARMY PUBLIC SCHOOL FEROZEPUR

Affiliated to Central Board of Secondary Education, New Delhi
Registration No. EX-01086-1415

REGISTRATION FORM

Admission in class _____

Registration No. _____

1. Full Name of the Pupil (in Capital Letters) _____
2. Sex: Male/Female _____ 3. Religion : Hindu/Sikh/Muslim/Christian _____
4. Date of Birth (in figures) _____ Age as on 31 Mar 20 _____ Years _____ Months _____ Days
5. Name of Mother Mrs./Smt. _____
6. Name of Father _____
7. Status (Officer/JCO/OR/Civilian) _____
8. Address : (a) Unit/Officer _____
(b) Local Address _____
(c) Permanent Home Address _____
Mobile No. _____ Tel. No.: (Civ) _____ (Army) _____
9. Father's income (Form all sources) per month _____
10. Details of children already studying in this school _____
(a) _____ (b) _____
11. Details of student's previously study : _____
(a) School in which already studied _____
(b) Class _____ Medium of Instruction _____ Date of Admission in that school _____
(c) Percentage of marks obtained in the last exam : _____
(i) English _____ (ii) Hindi _____ (iii) Science _____
(iv) Maths _____ (v) Social Science _____ (vi) Other Subject _____
12. Certified that the above particulars are correct

Dated _____

Signature of parents/Guardian _____

FOR USE BY THE ADMISSION COMMITTEE ONLY

Application received on _____

Regn No. _____

Certified that the student appeared for Admission Test in class _____ (Pass/Fail/Retest)

and recommended for Class _____

(Signature of Admission Committee Incharge)

Dated _____

Name _____

Designation _____