



# Good Samaritan School

(Unaided Christian Minority Senior Secondary School)

Recognized by DoE and Affiliated to C.B.S.E.

Near Sector-8, Jasola, New Delhi-110025.

Ph. No. 011-41035311, 40516517

For Class - I

Affix Passport size photo here

## REGISTRATION FORM

No. ....

Registration for Class .....

For academic year 2023 to 2024

1. Name of the Student (In block letters) .....

2. Date of Birth                      Date                      Month                      Year

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(In words) .....

3. Father's Name (in Block Letters) ..... Edu. Qualification :.....

4. Mother's Name (in Block Letters) ..... Edu. Qualification :.....

5. Guardian's Name (If applicable) ..... Edu. Qualification :.....

6. Father's / Mother's occupation .....

7. Student's Aadhaar Card No. ....

### School Specific Parameters

8. Religion.                     

9. Sex :                       Male     Female

10. Caste Category:  SC     ST     OBC     General

11. Residential Address :.....

.....

12. Father's Email ID ..... Mobile No. ....

13. Mother's Email ID ..... Mobile No. ....

14. Sibling studying in this school (Real brother/sister)  Yes     No

15. Is the Child physically challenged?  Yes     No

16. Family Monthly income :.....

17. Pre-Primary/UKG completed:  Yes     No    Medium of Education in previous class .....

18. Single parent                       Yes     No

### Attested photocopies of the documents submitted:

- 1. **Proof of Date of Birth:** Municipal Birth Certificate (Hospital Certificate will not be accepted)
- 2. **Proof of Residence:** (Voter ID / Ration Card / Passport / Domicile Certificate of child or any of the parents / MTNL Bill / Electricity Bill / Water Bill / Passport of child/ any of the parents / Aadhaar Card / UID Card of any of the parents)
- 3. **Medical Certificate** for children with special needs
- 4. **For Christian Students:** Baptism Certificate of the child or parents
- 5. **Report Card:** Latest from the school in which the student last studied
- 6. **Transfer Certificate:** From the school in which the student last studied
- 7. **Aadhaar Card Copy** of parents and students

Please register my son /daughter/ ward named above in your school. I shall produce the requisite original documents at the time of admission:

Parent's Name & Signature with date: .....

### OFFICE USE:

Received on

Date: .....

Place: .....

Received by

Name: .....

Signature: .....

For Office use only

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19. Is the School transportation required?  Yes  No

20. Medical Information: Any special precaution to be taken for the child:

Any health condition: .....

21. If Christian Minority - Denomination : .....

a) Pastor's Name:.....

b) Church Address.....

22. If single parent, give details .....

23. If siblings are in this school, their details:

Sibling's Name	Class-Section	Admission No.	Fee Category
1. ....	.....	.....	.....
2. ....	.....	.....	.....
3. ....	.....	.....	.....
4. ....	.....	.....	.....

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**Undertaking**

I/We, ..... father of and ..... mother of (name of the child)..... hereby declare that the information given above by me/us is based on facts and authentic records. Admission of my child may be cancelled if any information is found to be false.

\_\_\_\_\_  
Mother's Signature

\_\_\_\_\_  
Father's Signature

Mother's Name .....

Father's Name .....

*(Incomplete application will be rejected)*

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