CENTRAL PUBLIC SCHOOL



क्रo संo/Sr. No.

Affiliated To
Central Board of Secondary Education (10+2), Delhi

Husenabad (Khaura), Mubarakpur, Azamgarh-276404 (U.P.)

Phone: 9198566542, 9911950326

ADMISSION FORM For Class Nursery to VIII

Session: 20.....-20.....

कक्षा जिसमें प्रवेश चाहिए/Class in which admission is sought for.....

छात्र का वर्तमान पासपोर्ट साइज फोटोग्राफ यहाँ चिपकाएँ

Passport size Photograph of the Student

1(a)	विद्यार्थी का पूरा ना	н												
	Name of the chil	d in full (in capit	al letters in	English))									
(b)	लिंग/Sex	पुरूष/Male			स्त्री/Fer	nale			3	भन्य/Otl	hers [
2.	जन्म तिथि (अंको में) Day	, 	Month	<u>1</u>	Ye	ear	1						
	शब्दो में/In words.													
	कक्षा मे प्रवेश के स	मय 31 मार्च तक 3	गयु	वर्ष			मास	П			दिन		1	
	Age of the stude	ent as on 31⁵ Ma	rch	Year			Mont	th L			Day		J	
3.	(1) बच्चे का रक्त स	मूह/Blood Group	of the child									,		
	(2) छात्र/छात्रा का	आधार कार्ड नंo/ A	adhaar Ca	d No. of	Student									
	(3) ई.मेल/Email lo	d												
4.	क्या आप सामान्य	श्रेणी/अनुसूचित/	जनजाति/ओर्ब	ोसी / अ	गर्थिक रूप	से कम	जोर वर्ग	/ विकल	नांग /	इकलौत	ी कन्य	ा, यदि हाँ	तो प्रम	ाण-पत्र
	संलग्न करें / Do yo	ou belong to Ger	n./SC./ST/C	BC/EW	S/Disable	d/S.G. C	Child? If	yes, atta	ach cei	rtificate	Э			
	निम्नलिखित मे से ज	नो लागू हो उसे सही	(√) करें।											
	सामान्य श्रेणी	अनु० जाति	अनु0 ज	नजाति	ओ०बी०	सी0		क रूप से गेर वर्ग	f	वेकलांग	T	इकलौर्त	ो कन्या	
	Gen.	SC	ST		OBC		EW		I	Disabl	led	SG	Child	
5.	माता और पिता / स्थ	ग्रानीय अभिभावक	का ब्यौरा / D	etails of	Parents/L	ocal Gu	ardian:							
1	पेता का ब्यौरा s of Mother/Fathe	r	मात	т/ Mothe	r		पिता/	Father			L	ocal Gua. (if any		
(i) नाम	/Name (in capital	letters)												
	ट्रीयता/Nationality													
	वसाय/Occupation													
Na Na	र्घालय का नाम, पूरा ame of office & ful th Telephone No.	पता व दूरभाष/ l address												
	र्ग आवासीय पता एवं Ill residential addres													
			· ·											
(V) स्थ	ायी पता / Permane	nt address												
(vi) वा	र्षिक आय / Annual	Income (₹)												
(vii) अ	ाधार कार्ड नंo /Aadl	naar Card No.												
6.	अन्तिम विद्यालय का	नाम व पता जहाँ पढ़	 ा हो :											
	Name & address													
7.	क्या पिछला विद्याल Whether last sch	•	• '											
8.	यदि पिछला विद्याल													
0	If, the last school				-									
9.	(a) विगत परीक्षा परि	रणाम/Kesult of la	stexamina	ion:				(b) प्रो	तशत/।	ercent	age			

10.	Last School affiliated is									
	(i) CBSE	(ii) ISC	CE	(iii)	IB					
	(iv) State Board	(v) Any	y other	(please specify)						
11.	Result of the last Class:									
	Subject	Maximum Marks	Mar	ks Obtained	% of M	larks	Remarks			
	-									
			+							
12.	Transfer Certificate I	Details* :-								
	Transfer Certificate N	No.:								
	Date of Issue:			•••••	• • • • • • • • • • • • • • • • • • • •					
13.	Details of Siblings (if	any)								
	Nam	ie	Class	Brother/Sister	Age	Schoo	ol Studying in			
		<u>D</u>	ECLA	RATION						
Name a instruction mention	y declare that the above and Date of Birth furnitions and rules contained there in. During the defrom time to time.	ished by me is correctined here in & the	ct to the C.P.S.	best of my knowl Prospectus and u	ledge & be understood	lief. I have I all the ru	thoroughly read the les and regulations			
Signat	ure of the Guardian	Sign	ature o	f the Mother		Signa	ature of the Father			
Relatio	on with Candidate:				,					
Date: .		Place:								
		FOR O	FFIC	E USE ONLY	<u>Y</u>					
Certific	ed that I have checked	the application for	m and th	ne relevant paper	rs are foun	d in order.				
Please	admit to class	Section	l	after checking	the releva	ant papers.				
Date: .						Sign. of A	dmission Incharge			
Name 1	has been entered in th	e Class Attendance	Register	r: (P) Yes	No	7	5			
	ed that all the entries l		_	` '	d the dues	have been	received.			
Registr	ration No. of the stude	ent in Admission Wi	thdrawa	al Register is		Vo	ol			
Dated:										
Sign. o	of Office Assistant					Sign. of l	Principal with Seal			
A 1 '	alan aan-id-s 11 d	a sala al la la	lan '	41. 41	~ _ C41_ D	and O	uovo d			
	sion considered by the		iance wi	ith the provisions	s of the Bo	oard & app	rovea.			
Date: .										

^{*}In case, student is from other board, Transfer Certificate should be countersigned by the Competent Authority.

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Phone: 9198566542, 9911950326

ADMISSION FORM

For Class IX & XI

क्र0 संo/Sr. No. Session: 20.....-20....... कक्षा जिसमें प्रवेश चाहिए/Class in which admission is sought for.....

छात्र का वर्तमान पासपोर्ट साइज फोटोग्राफ यहाँ चिपकाएँ

Passport size Photograph of the Student

1(a)	विद्यार्थी का पूरा न	тн П					
	Name of the ch	ild in full (in capita	l letters in Englis	h)			
(b)	लिंग/Sex	पुरूष/Male		स्त्री/Female		अन्य/Others	
2.	जन्म तिथि (अंको र	में) Day	Mon	nth	Year		
	शब्दो में/In words	S					
	कक्षा में प्रवेश के र	प्रमय 31 मार्च तक आ	यु वर्ष		मास	दिन	
	Age of the stud	ent as on 31 st Marc	ch Year	. ———	Month	Day	
3.	(1) बच्चे का रक्त र	समूह/Blood Group o	of the child				
	(2) छात्र/छात्रा का	ा आधार कार्ड नंo/ Aa	dhaar Card No.	of Student			
	(3) ई.मेल/Email	ld					
4.	क्या आप सामान्य	य श्रेणी/अनुसूचित/ज	नजाति/ओबीसी /	आर्थिक रूप से क	मजोर वर्ग / विकलांग	/ इकलौती कन्य	ा, यदि हाँ तो प्रमाण-पत्र
	संलग्न करें / Do y	ou belong to Gen.	/SC./ST/OBC/EV	NS/Disabled/S.G.	Child? If yes, attach	certificate	
	निम्नलिखित मे से	जो लागू हो उसे सही (√) करें।				
	सामान्य श्रेणी	अनु० जाति	अनु० जनजाति	ओ०बी०सी०	आर्थिक रूप से कमजोर वर्ग	विकलांग	इकलौती कन्या
	Gen.	SC	ST	ОВС	EWS	Disabled	SG Child
5.	माता और पिता / स	थानीय अभिभावक क	ज्ञ ब्यौरा / Details o	of Parents/Local (Guardian:		
	पेता का ब्यौरा s of Mother/Fathe	er	माता/ Moth	ner	पिता/ Father	L	ocal Guardian (if any)
(i) नाम	/Name (in capital	l letters)					
(ii) राष	ट्रीयता/Nationality						
	त्रसाय/Occupation						
	र्यालय का नाम, पूरा ame of office & fu th Telephone No.						
	र् <mark>ग आवासीय पता एव</mark> ll residential addre	i दूरभाष/ ss with Contact No.					
(v) स्थ	ायी पता / Permane	ent address					
(vi) वा	र्षिक आय / Annua	I Income (₹)					
(vii) अ	ाधार कार्ड नं o /Aac	dhaar Card No.					
6.	अन्तिम विद्यालय क	ा ज नाम व पता जहाँ पढ़ा ह	हो :				
7							
7.		नय सी.बी.एस.ई/आई.२ hool was CBSE/IC	* .				
8.							
		ग्य केन्द्रीय माध्यमिक ि	•				
9.	If, the last school	ol was not affiliated	with CBSE, spec	cify name of the Bo	oard		

10.	Last School affiliated	d is						
	(i) CBSE		ISCE	(iii)	IB			
	(iv) State Board		Any other	(please specify).	•••••	• • • • • • • • • • • • • • • • • • • •		
11.	Result of the last Class		,		0/ 07.5	.		
	Subject	Maximum Mai	rks Mar	ks Obtained	% of M	arks	Remarks	
12.	Do you require scho	•	ES/NO	If yes, m	nention the	e pickup po	oint	
13.	Transfer Certificate I				Da	ate of Issue		
14.	Details of Siblings (if		•••••		D	ite of issue.		
	Nam		Class	Brother/Sister	er Age S		School Studying in	
	1 (402		1 21455		1180	3 3 3 3 3 3 3 3 3 3		
			1					
15.	Subjects Opted for C	lass IX/XI						
10.								
			DECLA	RATION				
	by declare that the abore and Date of Birth furn				*		· ·	
instru	ctions and rules conta	ined here in & t	he C.P.S.	Prospectus and u	nderstood	all the rul	es and regulations	
	oned there in. During the ded from time to time.	he period of study	ing of my	ward in the school	I shall abi	de by the ru	iles of the school as	
anich	ded from time to time.							
Signa	ture of the Guardian	Si	ignature o	f the Mother		Signa	ture of the Father	
(Rela	tion with Candidate:)						
Date:		Place	j:					
		FOR	OFFIC	E USE ONLY	7			
Certif	fied that I have checked	d the application	form and t	he relevant papers	s are found	d in order.		
Please	e admit to class	Sect	ion	after checking	the releva	nt papers.		
Date:						Sign of Ac	Imission Incharge	
Name	e has been entered in th	ne Class Attendan	ce Registe	r· (P) Yes	No]	imission incharge	
	fied that all the entries		_	` '		l have been 1	received.	
	tration No. of the stude			_				
Dated	l:							
Sian	of Office Assistant					Sign of D	ringinal with Saal	
	of Office Assistant						rincipal with Seal	
	ssion considered by th	e school is in acc	ordance w	ith the provisions	of the Bo	ard & appr	oved.	
Date:								

^{*}In case, student is from other board, Transfer Certificate should be countersigned by the Competent Authority.