



Saraswati Model School

(Recognised)

Sector - 10, Dwarka, New Delhi - 110075

Form for Admission to Class _____

(Please Fill the Form in Block Letters)

Name of the Student _____

Date of Birth (in Figure) _____ (In Words) _____

Father's / Guardian's Name _____

Educational Qualification _____ Occupation _____

Official Address _____

_____ Phone _____

Mother's Name _____

Educational Qualification _____ Occupation _____

Official Address _____

_____ Phone _____

Residential Address _____

_____ Phone _____

Last School Attended _____

Do you need school transport Yes No

DECLARATION

1. I certify that the statement made by me in this form is correct.
2. I have made a careful note of various details regarding the payment of school fees & Uniform
3. I shall abide by the rules & regulation of school discipline and transport.
4. Once the fees deposited will not be refunded.

Date _____

Signature of Parent/Guardian

FOR OFFICE USE

Admission No. _____

Date _____

_____ Son/daughter of _____ is admitted into class _____

Class Teacher

Principal
Saraswati Model School