



# 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 \_\_\_\_\_ (M/F)

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

Please affix passport  
size Photograph  
of Child