

Form No. 5

APPLICATION FORM

D.S. MODEL SCHOOL (Regd.)
Co-Educational – English & Hindi Medium
350, MAULI JAGRAN, CHANDIGARH (U.T.)

1. Class : _____
2. Name of Student : _____
3. Father's Guardian's Name : _____
4. Mother's Name : _____
5. Date of birth : _____
6. Age as on : _____
7. Correspondence Address : _____

8. Permanent Address : _____

9. Allergy : _____
10. Weight : _____
11. Occupation of Father / Guardian : _____
12. Annual income of family
from all sources : _____
13. Phone No. : _____

DECLARATION: -

I hereby declare that above contents are true and correct to the best of my knowledge and belief and nothing has been concealed therein.

Date: -
Place: -

For Office Use: Class..... Section..... Roll No.....
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Signature of Parents / Guardian

Form No. _____

ACKNOWLEDGEMENT

DATE.....

It is certified that..... S/D/o has been admitted in Class

Principals
D.S. Model School
Mauli Jaaran, Chandigarh