D.A.V. PUBLIC SCHOOL

SECTOR 39-D, CHANDIGARH

Admission Form Session 20 - 20

Photo with Date

S. No.	022	230111 01111 00331011 20 20	Date
Admis	sion No	To be fi	illed by office
1.			
2.	Gender : Male	Female	Any other
3.	D.O.B. : Date :	Month:	Year :
	in words		
	(Attach Date of Birth Certificat	te issued by the Competent Author	ority)
4.	Details of Parents :-		
	Details	Mother	Father/ Guardian
	Name		
	Aadhar Number		Military and the
Est State of	Residential Address :		
2 B D	E-mail:		
	Designation / Occupation/ (Educational Qualification)		
	Official Address		
1	Annual Income :		
	Phone / Mobile No. :		
5.	Whether the candidate is :-		
	(i) Single Girl Child:	Yes	No 💮
	(ii) Speically abled (Divyan	ngian): Yes	No
	(iii) Belonging to the EWS	Yes	No.
	(Attach proof wherever applic	cable)	
6.	Category : (Attach proof) :Ge	eneral SC ST	OBC EWS
7.	Minority : Muslim Sik		Parsi
8.	Nationality:		
9.		proof)	
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			Luiste autoti	and fall on all		
1.	Class Last attended					
2.	Last School affiliated is		_	/:::\ ID [
	(i) CBSE (ii) ICSE (iii) IB (iv) State Board (v) Any other (please specify)					
3.	(iv) State Board Result of last Class	(v) Any	other (please spec	шу)		
	Subject	Maximum Marks	Marks obtained	% of marks	Remarks	
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Signature of the Principal

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