



QUEEN MARY'S SCHOOL, NORTHEEND

[A minority institution run by the Helen Jerwood Memorial Education Society of the Diocese of Delhi, Church of North India]
Plot No. 4-A, Model Town-III, Delhi-110009, Ph # 27676626/36 & 9711365678, Email: gmsdelhi@yahoo.in
(Recognized by The Directorate of Education, Delhi & Affiliated to C.B.S.E.)

Form. No. _____

Regn. No. _____

**Registration for admission in Class: _____
For Session 2021-22**

Parent's Photograph
with the Child

Latest
photograph of
the applicant

Principal's Sign _____

(To be filled by the office)

Adm. No. _____ Admitted in Class _____ Sec. _____ Date of Admission _____

STUDENT'S INFORMATION

1. First Name _____
(In block letters)

2. Middle Name _____

3. Last Name _____

4. Date of Birth (dd/mm/yyyy) ____/____/____

5. Nationality _____

6. Religion _____

7. Category: SC/ST/OBC/GEN _____

8. Mother tongue _____

9. Residential Address: _____

_____ Phone No. _____

10. Mailing Address _____

_____ Phone No. _____

11. Conveyance Mode : School Transport Private

12. Name of Local Guardian (if any) _____ (i) Relation with the child _____

(ii) Address _____

(iii) Mobile No. _____

(iv) E-mail Id _____

(v) Mobile No. _____ (vi) E-mail Id _____

13. Name of the Person authorized by the parents to pick up the ward from the school

(i) _____

(ii) Relation of the person with child _____ (iii) Mobile No. _____

14. Real Sister Studying in this school. (If yes Adm. No.) _____ Class _____ Sec. _____

15. Aadhar Card No. (Optional) of the Child _____

P.T.O.

LAST SCHOOL ATTENDED:

Name of the institution	Year of study	Class	Grade in Annual Exam	Other Activity, if any
1. _____	_____	_____	_____	_____
2. Transfer Certificate No. _____		Date _____	Issued from _____	

PARENT'S INFORMATION

16. **Father's Name** _____

17. Qualification _____ Ph/ Cell No. _____

18. Occupation: Business Govt. Service Private Service 19. Annual Income: _____
(Optional)

Specify Business: _____ Designation: _____

20. Office Address _____

Phone No./ Cell No. _____ E-mail Id _____

21. **Mother's Name** _____

22. Qualification _____ Phone No./ Cell No. _____

23. Occupation: Business Govt. Service Private Service 24. Annual Income: _____
(Optional)

Specify Business: _____ Designation: _____

25. Office Address: _____

Phone No./ Cell No. _____ E-mail Id _____

Declaration

I/ We hereby declare that the information given in this registration form is true and correct to the best of my/ our knowledge. Any information given above if found false/ incorrect then candidature of my ward for admission will be cancelled. I/ We affirm that I/ We will abide by the rules and regulations of the school.

Date Signature of the Parent /Guardian _____

Principal's Remarks _____

Signature of the Principal _____



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Acknowledgement slip

Form No. _____ Registration No. _____

1. Name of the child _____ 2. Registered for Class _____