D	istra	4:	AI -
Ren	IISTITA	TION	MO

REGISTRATION FORM



D ynast Orchid

Faridabad

NON - TRANSFERABLE

k. Annual income

Affix passport size photograph of the father

Affix passport size photograph of the mother

Affix passport size photograph of the student

(PLEASE FILL IN BLOCK LETTER 1. Name of the pupil: Master / I				
Example K R I T I	B A N	I S A W	H N E Y	
2.a. Date of birth Date	Month	Year	Exam	ple
			0 1 1 1	2 0 1 1
b. Date of birth in words				
c. Age as on 1st April, 20	у	ears	Months	Days
d. Sex (tick where applicable)		Male	Female	
e. Religion		N	ationality	
3. Tick the class to which admissio	n is sought	Pre-Nur.	Nur. K.G.	
4.RESIDENTIAL ADDRESS				
4.RESIDENTIAL ADDRESS				
		ather		other
Family Particulars	F		M	
Family Particulars a. Name	F	ather	M	
Family Particulars a. Name b. Academic Qualification	F	ather	M	
Family Particulars a. Name b. Academic Qualification c. Name of School	F	ather	M	
Family Particulars a. Name b. Academic Qualification c. Name of School d. Name of University/College	F	ather	M	
Family Particulars a. Name b. Academic Qualification c. Name of School d. Name of University/College e. Occupation	F	ather	M	
Family Particulars a. Name b. Academic Qualification c. Name of School d. Name of University/College e. Occupation f. Designation	F	ather	M	
Family Particulars a. Name b. Academic Qualification c. Name of School d. Name of University/College e. Occupation f. Designation g. Office Address	F	ather	M	
Family Particulars a. Name b. Academic Qualification c. Name of School d. Name of University/College e. Occupation f. Designation g. Office Address h. Ph. No.	F	ather	M	
Family Particulars a. Name b. Academic Qualification c. Name of School d. Name of University/College e. Occupation f. Designation g. Office Address	F	ather	M	

Previous academic record of	the student		
a. Name and address of the prev	rious school		
o. Grades obtained in the last an	nual examination if applicable		_
Describe your child . (Play hab	oits, discipline, values, mood s	wings, etc. in 20-30 words).	
How did you learn about Dyna Word of mouth Ne	wspaper Friends	Specify name :-	
Whether belongs to SC/ST/OB		Yes/No, if yes please specify	
Details of siblings (sister or bro			_
(i) Name .	•	School	
(ii) Name			
(iii) Name			
In case of staff child, name of the			
Declaration :	ne employee working with the	organization	_
arrangements for remittance of3. I understand that rendering fa4. Having read carefully the rules	s, regulations and procedures la	ry fee payment month. withholding correct information may disqualify the chid down by the school, I hereby agree to abide by th	em
 I have made careful note of variangements for remittance of arrangements for remittance of a lunderstand that rendering farefully the rules and any changes thereafter in Signature (Father) 	of school fees by the 10th of evenues or misleading information or s, regulations and procedures land all respects. I understand that	ry fee payment month. withholding correct information may disqualify the chid down by the school, I hereby agree to abide by the the decision of the Principal shall be final and bindin Signature (Mother)	em g.
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