LEELAWATI PUBLIC SCHOOL

(Recognised & Affiliated to C.B.S.E.)

280, BHOOR BHARAT NAGAR, RAMPURI, GHAZIABAD.
PH.: 2841151

Affix here Passport Size Photograph

APPLICATION FOR ADMISSION TO THE ACADEMIC

FORM NO.

SESSION 20..... TO 20.....

1. CLASS TO WHICH ADMISSION IS SOUGHT ____ STREAM ____
2. STUDENT FULL NAME (BLOCK LETTERS)
3. DATE OF BIRTH (DD MM YY) 4. Gender (Male/Female) 5. Hostel/Day School
6. FATHER'S NAME (BLOCK LETTERS)
7. MOTHER'S NAME (BLOCK LETTERS)
8. AADHAR No. / PAN No.
9. PERMANENT ADDRESS
10. TELEPHONE/MOBILE NO.
11. FATHER'S OCCUPATION
    (a) Designation & Department *(if in Service)* .....
    (b) If in Business than
    ADDRESS OF BUSINESS
12. ADDRESS OF OFFICE
13. FAMILY BACKGROUND
    (a) Father's Qualification (b) Mother's Qualification
    (c) Brother's Qualification (d) Sister's Qualification
14. WHETHER USING TRANSPORT FACILITY (Yes/No) IF 'Y' THEN PICKING POINT
15. Date (DD MM YY)

Admission form Rs. 100/-

LEELAWATI PUBLIC SCHOOL

(FOR OFFICE USE ONLY)

DETAILS OF PAYMENTS

School Receipt No. ..... Dated : ..... Admit to Class : .....For Rs. : .....

by Cash/Cheque : ..... as Hostel / Day School : ..... If Cheque then No. : .....

Accountant ***Manager / Principal***

Note : 1. Please Deposit your Ward's Transfer & Birth Certificate with in 7 days.
2. Copy of "Aadhar". 3. 4 Passport Size Photo Card.