



TITIKSHA PUBLIC SCHOOL

(Sr. Secondary School Recognised by Directorate of Education & Affiliated to CBSE)
Sector-XI, Rohini, Delhi- 110085, Tel: 011-27572591, 27570592 Mobile: 9540938181
Email Id.: info@titikshapublicschool.com Website: www.titikshapublicschool.com

General Registration Form For Academic Session 20....-.....

(FORM SHOULD BE NEATLY FILLED IN ENGLISH & CAPITAL LETTERS)

Registration No.: TPS/.....-...../General/.....

Photograph of
Student

- Name of the Child.....
- Class: Pre-school (3+) Pre-Primary (4+) Class 1 (5+)
- Date of Birth (In figures) : DD MM YEAR
(In Words)
- Age as on 31st March years months days
- Gender (Please tick) : Male Female Transgender
- Last School Attended.....
- Mother tongue..... Religion Nationality
- Father's Name.....Qualification.....
Occupation.....Designation.....
Organisation Name & Address
.....Email :
- Phone (Office) Mobile :
- Mother's Name.....Qualification.....
Occupation.....Designation.....
Organisation Name & Address
.....Email :
- Phone (Office) Mobile :
- Residential Address
.....Pin Code : Resi. Ph. No.
- Total Annual Income of the family from all resources
- Whether School Trasport facility is required Yes No
(if Yes, specify the area

Admission Criteria

1. Neighbourhood : Distance from School km

70

2. Sibling in Titiksha Public School, if any (real brother/sister) : Yes No

(a) If yes, give details :

Name	Class & Sec.	Admission No.

20

(b) Staff Ward (if yes) Name of staff Member Yes No

3. Girl Child : Yes No

10

Documents required at the time of Registration

1. Self attested photocopy of Date of Birth certificate of the child
2. Print copy of the Google Road Map for verification of the Distance from school to your residence
3. Proof of Identity of Parents (Voter ID Card/ Aadhaar Card / PAN Card / Passport (valid on the current date)
4. Address proof (Ration card / Aadhaar Card / Voter ID / PAN Card / Electricity Bill / Telephone Bill / Passport/ Driving License
5. Proof in case of sibling (Photocopy of the Identity Card of brother / sister studying in this school)
6. Proof in case of Staff Ward: (Photocopy of the Identity Card of the staff)

CERTIFICATE FROM PARENTS

1. I / We hereby certify that the above information provided by us is correct. We understand and accept that if information is found to be incorrect or false, our ward shall be automatically debarred from selection/admission process without any correspondence in this regard. We also understand that the Application of Registration / Short-listing does not guarantee admission to my ward. We accept the process of admission undertaken by the School and we abide by the decision taken by the school authorities.
2. I / We undertake to submit all the required documents in originals for verification by the school.
3. I / We undertake to pay fee & other charges within the stipulated time period to secure admission.

Date _____ Signature of Mother _____ Signature of Father _____

FOR OFFICE USE ONLY

100

Total Points

_____ Admission Incharge _____ Checker _____ Incharge

Admission : Granted / Not Granted

Date:

_____ Principal