



ARMY PUBLIC SCHOOL, ALWAR

(Affiliated to CBSE, New Delhi- Code No-1780018)

APPLICATION FOR ADMISSION

Affix a Passport size Photograph duly attested by Gazetted Officer

Ser No

Admission No

1. FULL NAME OF THE STUDENT (In Capital letters) :.....

2. Date of Birth (In Words) :.....

(In Figure)

D	D	M	M	Y	Y	Y	Y

Age Year :..... Month:

Authority (attach Birth Certificate from unit) :.....

Gender of Student Male Female

Aadhar Card Number of Student

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3. FATHER'S NAME (In Capital letters) :.....

Education Qualification :.....

Occupation (a) Army/Navy/Air Force/Defence :.....

Civilian :.....

(b) Rank :.....

(c) Serving/Retired/Civilian :.....

(d) Category :.....

(SC/ST/OBC/GEN/Other) :.....

(e) Aadhar Card Number

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(f) (i) Bank A/C Number of Father :.....

(ii) Place of Branch :.....

(iii) Branch Name :.....

(iv) IFSC Code :.....

Father's Income per month (from all sources) :.....

4. MOTHER'S NAME (In Capital letters) :.....

Education Qualification :.....

Occupation (a) Army/Navy/Air Force/Defence :.....

Civilian :.....

(b) Rank :.....

(c) Serving/Retired/Civilian :.....

(d) Aadhar Card Number

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5. Address (a) Office :.....

(b) Residential :.....

6. (a) Class last Studied :.....

(b) School in which last studied :.....

(c) Medium of Instruction :.....

(d) Was the School Recognized or not :.....

(e) School Affiliation State Board/CBSE/Other :.....

7. Result of Last Examination Passed/Failed :.....

8. Class to which the admission is sought
9. Mother Tongue of the Student
10. Details of Transfer Certificate Attached, if any
11. Any Kind of Disability/ Allergic to any Drug (if Yes, submit certificate by competent authority)
12. Hobbies: Art, Music, Embroidery, Cutting & Stitching, Science Club etc.
13. Blood Group of Student

DECLARATION BY PARENT

I hereby declare that the date of birth of my son/daughter.....
 and other particulars are correct and that I would not demand any change in them at any subsequent date. I promise to abide by all school rules & regulations.

(Signature of Parent)

SERVICE CERTIFICATE
 (To be filled by Office Only)

1. Certified that Shri/Smt working in the office/Ministry of
2. He/ She is an employee of Defence Service/ CRPF/BSF/NDG/CISF/Central Govt./Autonomous Body/ Public sector undertaking fully financed by the Central Govt and his/her service are transferable anywhere in India. (Strike out which is not applicable).

Stamp of Office

(Signature)
 Name of the Officer
 Designation

MEDICAL CERTIFICATE

(To be Signed by Registered Medical Practitioner)

It is certified that Master/Miss S/o / D/o
 had been examined by me and found physically and mentally fit/unfit for admission.

Dated: (Signature with Seal)

PRINCIPAL'S RECOMMENDATION

Admit in class

(Signature of Principal)

OFFICE REMARKS

Admitted in class And allotted section

Office Seal

(Signature of Supdt)

Dated:

UNDERTAKING BY PARENT/GUARDIAN

We, the undersigned, join Army Public School Alwar in efforts to successfully create a clean, safe and healthy environment to promote positive student behavior and achievement.

I Father/Mother/Guardian of

(Name and class of the child), agree to:

- Read the rules and regulations outlined in the general code of conduct.
- Teach and encourage my ward to follow school guidelines.
- Send my ward in neat turnout and proper haircut.
- Ensure no unwanted/undesired things is brought by my ward.
- Ensure my ward is not absent without prior written application submitted. Also understand 75% of attendance is mandatory for sitting in exam as per CBSE rules. Hence, no long leave will be taken.
- Teach my ward to respect & obey school staff and fellow friends. Regarding/abuse/slang/bullying will lead to expulsion.
- Notify school authorities as and when information is needed about my ward.
- Not send/give money to my ward.
- Ensure discipline is maintained by my ward in and outside school premises.
- Ensure **COVID** protocol is followed by my ward.
- Pay fee hike w.e.f. this session.....
- Pay Quarterly fee on time, before 10th of quarterly months (Apr, Jul, Oct & Jan). In case of nonpayment, Late fees as applicable will be paid. In case of non-payment of fees for three consecutive months, I know the name of my ward will be struck off the rolls and readmission with written permission of Chairman with all dues paid will be done.

Parent' Signature

Name: _____

Phone No: _____

Unit Address: _____

Residential Address: _____

UNDERTAKING BY STUDENT

To,
The Principal
Army Public School, Alwar

I..... of class.....sec.....agree to:

Read and follow the rules and regulations outlined in General Code of Conduct:

- Not engage in bullying or abuse or use of slang of any kind and report immediately to authorities as and when I see or hear about it.
- Not bring any weapon, electric or electronic gadget and report immediately to authorities as and when I see or hear about it.
- Seek school authorities' assistance when conflicts arise involving me/my peers or school mates anywhere in or outside school.
- Understand that "Ragging is strictly prohibited inside/outside the school premises and no such act will go unnoticed or unpunished."
- Will maintain discipline and decorum expected from student of Army Public School, Alwar.
- Will address all members of the staff and fellow students with courtesy and politeness.
- Will follow the values of punctuality, regularity, discipline, and obedience.
- Will come every day in a neat and smart deportment for the day with proper haircut.
- Will not bring electronic or electrical gadgets, CD, Pen drive, Mobile phone, Apps, Money or any other valuable items to school.
- Will not carry any material which may be classified as obscene. I know It will lead to expulsion.
- Will not plagiarize, cheat, gain unauthorized access to school property to or tamper/spoil any educational material or school property.
- Use or possession of controlled substances will lead to direct expulsion from school.
- Will not seek private tuitions from the teaching faculty of the school.
- Will converse and communicate with each other and with the teachers in English. English is the language of campus.

Student's Signature