



Ph: - 0184-2266339, 2266471

O.P.S. INTERNATIONAL SCHOOL

Kunjpra Road, Karnal-132001

Recent
passport size
photograph
of the student

REGISTRATION FORM

For Office use only.

Registration No.....

Receipt No.....dt.....

Registration Fee Rs.....

1. Date of Application.....
2. Name of Student (in Block Letters).....
3. Father's Name.....
4. Mother's name.....
5. Guardian's name.....(If Father is not alive)
(b) Relationship.....
6. Nationality.....
7. a) Date of Birth (in figures and words) D.....M.....Y.....
b) Age as on 1st April 200.....
8. Admission sought for class.....as Day Scholar/Hostler..
9. a) Name of the Previous school attended.....
b) Class Passed.....Year.....
c) Name of the Board to which the school is affiliated.....
10. Percentage of marks in the last examination.....
11. a) Father's/Guardian's Education and Profession.....
b) Mother Education and Profession.....
12. Name and Class of any real brother and sister in this school.....
13. Address for Communication.....
Tel No. Resi.....Office.....STD Code.....
14. The Registration fee of Rs..... (non-refundable) is paid herewith. I understand fully that the School, on accepting this fee and on registration his/her name, is not in any way bound to provide a seat but admission will be given only when the student is found fit for admission and when a suitable vacancy arises.
15. Registration form will be rejected if it is incomplete in any way. No correspondence will be entertained in this regard.

I hereby declare that the above information given in the registration form is correct & true to the best of my knowledge.

Date.....

.....
Signature of Parent
Father/Mother