

ARMY PUBLIC SCHOOL, TALBEHAT

(To be filled in and send with the Transfer Certificate / Birth Certificate)

1. Name of the Student _____
(In capital letters)
2. Date of birth _____
(In words)
3. Full Name of Father _____
(In capital letters)
4. Name of Mother _____
(In capital letters)
5. Postal address _____

6. Nationality _____ State _____
7. Religion _____ Caste _____
Category _____ (GEN/OBC/SC/ST)
8. School last attended by the Student _____
9. Date of leaving the school _____
(Submit Transfer Certificate of last school)
10. Class in which admission is wanted _____
11. List of documents / certificate attached with the application _____



DECLARATION OF GUARDIAN

I certified that the monthly fee and other dues will be carried before 20 th of every Qtr in which the bill presented.

Contact No: _____ Signature of the Parents _____

FOR OFFICE USE ONLY

Name of Applicant _____ Class _____
Date of Admission _____ Enrolment No _____
Marks of Entrance Test _____

Signature Of Principal

TO BE HANDED OVER TO CLASS TEACHER

Name of Student _____ Class _____
Date of Birth _____ Adm No _____
Fathers Name _____
Address _____

Office Clk

Signature Of Principal