

**CRPF PUBLIC SCHOOL**  
Sector- XIV, Rohini, Delhi-110085  
e.mail: [crpfschoolrohini@gmail.com](mailto:crpfschoolrohini@gmail.com) Website: [www.crpfpsrohini.org](http://www.crpfpsrohini.org)  
Telephone No. 011-27562305, 011-47517653

**REGISTRATION FORM for UKG (NON-CRPF) FOR THE SESSION 2024-25**

( To be filled in Block Letters)

Recent Passport Size Photograph of Father (Self Attested)
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Recent Passport Size Photograph of Mother (Self Attested)
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Recent Passport Size Photograph of the child
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1. Name of the Child \_\_\_\_\_

(Aadhar No. of child, attach Photocopy) \_\_\_\_\_)

2. Date of Birth

Date	Month	Year								
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( In words ) \_\_\_\_\_

Age as on 31/3/2024 \_\_\_\_\_ (Year) \_\_\_\_\_ (Months) \_\_\_\_\_ (Days)

3. Gender : 

Male
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Female
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 ( Tick whichever is applicable )

4. Residential Address : Area Code 

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 In Kms. 

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(Area Code/Details displayed at School Notice Board/Website)

5. **Details of Father :**

**Details of Mother :**

a) Name \_\_\_\_\_

Name \_\_\_\_\_

b) Age \_\_\_\_\_

Age \_\_\_\_\_

- c) Nationality \_\_\_\_\_ Nationality \_\_\_\_\_
- d) Mother tongue \_\_\_\_\_ Mother tongue \_\_\_\_\_
- e) \*Occupation/Designation : \_\_\_\_\_ \*Occupation/Designation: \_\_\_\_\_  
 \_\_\_\_\_
- f) Office Address : \_\_\_\_\_ Office Address : \_\_\_\_\_  
 \_\_\_\_\_
- g) Telephone No. (Office) \_\_\_\_\_ Telephone No. Office) \_\_\_\_\_
- h) Mobile Number \_\_\_\_\_ Mobile Number \_\_\_\_\_
- i) e.mail ID \_\_\_\_\_ e.mail ID \_\_\_\_\_
- j) SC/ST/OBC/General \_\_\_\_\_ SC/ST/OBC/General \_\_\_\_\_  
 (Write whichever is applicable)\* (Write whichever is applicable)\*
- k) Whether Muslim/Sikh/Jain/ Buddhist Whether Muslim/Sikh/Jain/Buddhist  
 Christian/Hindu/others\* \_\_\_\_\_ Christian/Hindu/others \_\_\_\_\_  
**(Required only for the purpose of furnishing Data to Directorate of Education)**  
 The aforesaid information does not affect the suitability for the admission of candidate in  
 this school. \* The above particulars do not carry any points. \*Information is only for record  
 purpose.

6. (a) Whether sibling(real brother/sister) studying in CRPF Public School, Rohini ? Please reply only with reference to real sister or brother. (Tick whichever is applicable)

Yes	No
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6. (b) Details of the sibling:

S.No.	Name of Sister or Brother	Name of the School	Present Class	Admission Number, in case child is studying in CRPF Public School, Rohini, Delhi

7. SCHOOL ALUMNI: (Attach appropriate proof- Class X/XII CBSE Certificate), applicable only if Class X/XII passed from School.

Father: Year of Passing \_\_\_\_\_ Mother: Year of Passing \_\_\_\_\_

Yes	No
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8.a) Does the child have some special needs? Yes/No (Tick whichever is applicable)  
If yes, give details \_\_\_\_\_

(b) Is the child suffering from any disease like:- Diabetes, Asthma, Epilepsy, Heart Disease, Communicable Disease, Speech Disability, any other. If yes, give details:

9. Attested photocopies of the documents are to be enclosed:

- a) Child's Aadhar Card Yes/No  
b) Attested photocopy of date of birth certificate of child issued by MCD/NDMC or any other authorized body Yes/No  
c) Indicative Documents valid as proof of residence of parent/child. (any one document) Yes/No

(a) Ration Card/Smart Card issued in the name of parents (Mother/Father having name of child). (b) Domicile certificate of child or of his/her parents. (c) Voter I-Card (EPIC) of any of the parents. (d) Electricity bill/MTNL telephone bill/Water bill/Passport in the name of any of the parents or child. (e) Aadhar Card/UID card issued in the name of any of the parents

- d) SC/ST/OBC Caste Certificate, if applicable Yes/No

Any other documents/certificates which the school requires for verification at the time of submission/admission.

I/We certify that the above information provided by me/us is correct and I/We understand that if the information is found to be incorrect or false, my ward shall be automatically debarred from admission process without any further correspondence in this regard. I/We also understand that the application/registration/short listing does not guarantee admission to my ward. I/We accept the process of admission undertaken by the school and I/We will abide by the decision taken by the school authorities.

- I will be solely responsible for safe commuting of my son/daughter to and from the school.
- I am aware of immunization programme and my son/daughter has been administered the required vaccines.
- I shall abide by the rules/regulations of the school.

Please register my son/daughter named above in your school. I shall produce the original requisite documents at the time of admission:

Name /Signature of Father \_\_\_\_\_

Name/Signature of Mother \_\_\_\_\_

Date:

**Note: Only self attested photocopies of the documents are to be enclosed. Originals will be required at the time of admission for verification.**

**In case, the number of applicants is more than the number of seats available, the selection will be made on the basis of Draw of Lots for identical points.**

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#### A C K N O W L E D G E M E N T

Regn. No. \_\_\_\_\_

Date of Regn. \_\_\_\_\_

Name of Child \_\_\_\_\_

Class - UKG - 2024-25 \_\_\_\_\_