



St. PAUL'S PRE-SCHOOL

(An unaided Christian minority institution established in 1968)

C-3, Safdarjung Development Area, Hauz Khas
New Delhi 110 016. Tel. : 26511725, 26968984, 26534202

E-mail : stpauls@stpauls-delhi.com

Website : stpauls-delhi.com

Photograph
of the Child

Registration Form
No.

Admn. No.

| 1. | Name of the Child (in Block Letters) | | | Points | |
|-----|--|---|--|--|-----------|
| 2. | Date of Birth | DD <input type="text"/> <input type="text"/> | MM <input type="text"/> <input type="text"/> | YYYY <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | |
| | In Words | | | | |
| 3. | Father's Name | | | | |
| 4. | Mother's Name | | | | |
| 5. | Residential Address | | | 20 | |
| | Contact Phone No(s) | Residence (Mobile) Father | (Mobile) Mother | | |
| | E-mail Address | | | | |
| | | | | | |
| 6. | Sibling in St. Paul's (Real brother/sister only) [Tick the appropriate] If sibling in St. Paul's School, give details | Yes <input type="text"/> | No <input type="text"/> | 10 | |
| | | Name | | | |
| | | | Class/Sec. | | Admn. No. |
| | | Name | | | |
| | | | Class/Sec. | | Admn. No. |
| 7. | St. Paul's Alumni [Tick the appropriate] | | | | 05 |
| | | If Yes, year of passing | | | |
| | (A) Father | Yes <input type="text"/> <input type="text"/> | No <input type="text"/> | | |
| | (B) Mother | Yes <input type="text"/> <input type="text"/> | No <input type="text"/> | | |
| 8. | Child with Special Needs [Enclose authenticated documents) | Yes <input type="text"/> | No <input type="text"/> | 05 | |
| | | | | | |
| 9. | EWS [Enclose authenticated documents) Total Annual Income of both the parents | Yes <input type="text"/> | No <input type="text"/> | | |
| | | In figure | | | |
| | | In words | | | |
| 10. | Whether belonging to any Minority Community. If yes, specify which one | Yes <input type="text"/> | No <input type="text"/> | 20 | |
| 11. | Gender | Boy <input type="text"/> | Girl <input type="text"/> | 10 | |
| 12. | Father | Profession | | | |
| | | Is the job transferable | Yes <input type="text"/> | No <input type="text"/> | |
| | | Designation (if applicable) | | | |
| | | Office Address | | | |
| | | Tel. No./Mobile | | | |
| | Mother | Profession | | | |
| | | Is the job transferable | Yes <input type="text"/> | No <input type="text"/> | |
| | | Designation (if applicable) | | | |
| | | Office Address | | | |
| | | Tel. No./Mobile | | | |

| Guardian's Name (if applicable) | | | Points |
|--|--------------------------------|--|--------|
| | Profession | | |
| | Is the job transferable | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| | Designation (if applicable) | | |
| | Office Address | | |
| | Tel No./Mobile | | |
| 13. Religion | | SC / ST: <input type="checkbox"/> | |
| 14. Orthodox Christian Student (Tick only if applicable) | Yes <input type="checkbox"/> | No <input type="checkbox"/> | 20 |
| 15. (a) Is the School transportation required | Yes <input type="checkbox"/> | No <input type="checkbox"/> | 10 |
| (b) If no, are you in a position to provide safe transportation to the student to and from the School? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| 16. Are you a single parent ? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |

- Photo copy of the following should be attached along with the application: (Produce the original at the time of admission)
Municipal/Panchayat Birth Certificate shall be attached with the Application. Hospital certificate will not be accepted.
Medical certificate of the child (for children with special needs.)
Proof of Residence – only electricity bill/voter's I card/Passport
Proof for sibling (wherever applicable)
Proof of Alumni (wherever applicable)
Orthodox Christian students shall bring Parish Vicar's Certificate
Christian students shall attach the Baptism Certificate

RESIDENCE LOCALITY POINTS

| Distance Range | Points |
|----------------|--------|
| Upto 3 km | 20 |
| 3 km - 5 km | 15 |
| 5 km - 8 km | 12 |
| 8 km - 10 km | 10 |
| 10 km - 15 km | 5 |

CERTIFICATE FROM THE PARENT

I/we hereby 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 and the necessary supporting documents are not enclosed, the ward shall be automatically debarred from selection/admission process without any 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.

.....
Signature of the mother

.....
Signature of the father

Name of the mother:.....Name of the father:.....

Date :.....

Orders of the Principal.....

Signature of the Principal.....

List of Supporting Documents to be Produced by the Parents at the Time of Admission

- Date of Birth Certificate of the Child.
- Medical Certificate of the Child (for children with special needs)
- Proof of Residence - Only Electricity Bill/Voter's I Card
- Proof for Sibling (wherever applicable)
- Proof for Alumni (wherever applicable)
- Orthodox Christian students shall bring Parish Vicar's Certificate.