

SAAI MEMORIAL GIRLS SCHOOL

Sai Bhawan, Geeta Colony, Delhi-110031
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	A SECOND		
	1 (-)	July 1	
	REC	SISTRATION FOR	M
(-°-)	SESSION	REG. NO	CLASS
	Photograph of the child	Photograph of the Mother	Photograph of the Father
1. Name of the student (I	n Block Letters)		
2. Date of Birth	In words		
3. Residential Address &	Telephone Number		
4. Nationality	Di	stance from Home to Sch	oolK.M.
Name of Mother :		Name of Father :	
Qualification :		Qualification :	
Occupation :		Occupation :	
Designation :		Designation :	
Email :		Email :	
Mobile No :		Mobile No :	
Address:		Address :	
5. Medical Information of	the student : past history o	f any illness : Yes / No	

If yes, give details....

	Does the child have some special needs? Yes / No
	If yes, give details
7.	If Sibling (Real Sister only) is in the same school, attach Id card photocopy.
	Sibling Name
	Class - Section
8.	Are you a single Parent ? Yes / No (Tick whichever is applicable)
9.	Is School Transportation required ? Yes / No (Tick whichever is applicable)
PI do	lease register my daughter / ward named above in your school. I shall produce the requisite ocuments at the time of admission.
	UNDERTAKING
he	father / mother / guardian of
Się	gnature of Mother Signature of Father
	DOCUMENTS REQUIRED:
	DOCUMENTS REQUIRED: Photocopy of the following documents are to be attached: