REGISTRATION FORM

Regn. No. .....

Class .....

ADMISSION NOT GUARANTEED

PARENT | PARENT | CHILD

SINDHI HIGH SCHOOL

(Affiliated to CBSE, New Delhi)

Sponsors: SINDHI SEVA SAMITI

33/2A & 2B, Kempapura, Hebbal, Bengaluru - 560 024.
Tel: 080-23621393 / 94, 41178289
Email: shshebbal2016@gmail.com www.sindhihighschool.edu.in

STUDENT'S PARTICULARS

1. NAME (in Block Letters) _____
First Name Middle Name Surname

2. Sex ☐ 3. Date of Birth D D M M Y Y Y Y 4. Age as on 1st June 20__ - __ Years __ Months

5. Nationality _____ 6. Religion _____

7. Caste _____ (with supporting docuements) 8. Mother Tongue _____

9. Class into which Admission sought _____ 10. Class last studied in _____

11. Name of the school last studied _____

12. Residential Address _____

PIN _____

PARTICULARS OF SIBLINGS

A. Name (in Block Letters) **and Class of OWN Brothers / Sisters if any studying in this institution.(Hebbal/K K Road)**

1. NAME _____ Class _____

2. NAME _____ Class _____

B. Information about the pupil regarding - Allergies / Distinguished Problems / Others (in brief)

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REGISTRATION FORM

Regn. No. .....

Class .....

ADMISSION NOT GUARANTEED

1. NAME _____

2. Interaction Date D D M M Y Y Y Y Time __ . __ am / pm

NOTE:

1. The Pupil will have to attend the entrance exam on the date and time intimated
2. The list of pupils selected for admission will be put-up on the Notice Board
3. The management reserves the right to refuse admission to any pupil without assigning any reason
4. Change of date and time of entrance exam will not be entertained
5. **REGISTRATION OF THE PUPIL'S NAME IS NOT A GUARANTEE FOR ADMISSION**
6. **AS PER POLICY, SINDHI HIGH SCHOOL DOES NOT ACCEPT ANY DONATION FOR ADMISSION**
7. **Last date for submission** D D M M Y Y Y Y

For Sindhi High School

Signature

PARENTS' PARTICULARS

1. **Father's Name**

2. Educational Qualification 3. Occupation / Service

4. Office Address

PIN

5. Contacts: Office: Res. Mobile

Email ID

1. **Mother's Name**

2. Educational Qualification 3. Occupation / Service

4. Office Address

PIN

5. Contacts: Office: Res. Mobile

Email ID

I hereby declare that the above furnished details are correct.

Place: Bangalore

Date: D D M M Y Y Y Y

Signature of Father / Guardian

Signature of Mother / Guardian

Tear off slip

Enclosure Details

The duly filled in Registration Form to be submitted along with the following enclosures:-

- Xerox copy of Age Proof. (Birth Certificate issued by the Corporation/Transfer Certificate from previous school)
- Xerox copy of any two of the following **Address Proofs** (not prior to six months)
  1. Recent Voter Identity Card 2. Ration Card 3. Unique ID (Aadhar) 4. Passport 5. Bank Statement / Pass Book 6. Telephone Bills (BSNL only) 7. Electricity Bill
- If either parent is an Alumni, please attach a supporting document (Marks Card / TC / Study Certificate)

ADMISSION DETAILS

1. Two original address proofs to be furnished at the time of Admission along with Xerox copy (For verification only)
2. Xerox copy of fee paid receipt
3. Annual Fee (Refundable Deposit and Tuition Fee) should be paid in full by ONLINE or D.D. drawn in favour of **'SINDHI HIGH SCHOOL'**
4. **Annual Fees once paid, will not be refunded under any circumstances**