



B.R.B. Model School

A Senior Secondary Co-Educational School
Affiliated to C.B.S.E., New Delhi

Opp. Har Prasad Mandir, Budaun. U.P. 243601, Ph.: 05832-221543, +91-9358263059

Photo

ADMISSION FORM

Scholar No. _____

Form No. _____

1. Scholar's Full Name
(In Block Letters)
2. Father's Name
3. Mother's Name
4. Date of Birth Date Month Year
5. Sex Male Female
6. Father's Profession & Designation.....Annual income.....
7. Mother's Profession & Designation.....Annual income.....
8. Address.....
9. Phone/Fax No.
10. Name of the Institution last attended.....
11. Class in which admission is sought.....
12. Category : (General/OBC/SC/ST/Other (Specify).....
13. Additional Information:-
 - (1) Name of Brother/Sister studying in same scheme
 - (1) NameClass.....Sec.....
 - (2) NameClass.....Sec.....
 - (2) Are you staff Child (Yes)/(No)
If Yes. Name.....Designation.....
14. For Admission in Class XI only.
 - (1) Name of School last attended.....
 - (2) Affiliates From.....
 - (3) Percentage / C.G.P.A. / Grade.....
 - (4) Subjects Desired at senior secondary Level.
(1).....(2).....(3).....
(4).....(5).....

Declaration: I here by declare that all the information provided by me are true to the best of my knowledge & belief.
If above given informations are found to be incorrect, I shall be bound to the decision taken by the school authorities.

Scholar's Sign

Date.....

Signature of Parents/Guardian

- (1) Father.....
- (2) Mother.....
- (3) Guardian's Full Name.....
Relation.....
Signature.....