

Address

Phone Nos.

Email Id

INDIAN SCHOOL DARSAIT



APPLICATION FORM ADMISSION TO NIOS COURSES 2017 - 2018 CLASS X & XII

					<u>C1</u>			<u> </u>	ZXI J	<u> </u>								
Note: Please Selection of S Kindly tick t	Subjec	ts: (C	-			•				_							oject	ts)
Class X												_						1
_	2) B 3) P 4) D	Select Ialaya Susine aintin Oata E	any alam ess St ng wit antry		y) / Hin (215 ctica	ndi (201)							Fix th				
Class XII:																		
Group 1) H 2) A 3) D 4) B 5) P Note: - (i) Subj (ii) A st	udent n	Select cienc tancy try O s Stud g with th * h	tany te* (320 te* (320 terated ites) terated ites terated	4 onl (21) (21) (319) (tical* (heory of tained	(336) (332) (332) (332) (332) (332) (332)	() 2) ell as inim	prac um a				giste	er foi	r Cla	uss X	and	sho	uld I	nave
passed Class X	X & atta	ined .	15 yea	ars for	Clas	s XI	I.	1		1			ı					
Name in full																		
Age	,	Years	D	ate of	Birtl	h (DI)-MM	-YY	YY)									
Male			Fema	ale														
Father's Nam	e		:	!														
Mother's Nar	ne		:	:														
Passport No			:	!					_	Ex	kpir	y Da	ite:					
Place of Birth				: Nationality:														
Mother Tongo	ue		:	;					Rel	igio	n an	d Ca	aste	:				

: House No: _____ Building No: ____ Way No: ____

Area: ______ P.O. Box No: ____ P.C.: ___

: Res: _____ Mobile: _____

Detail	of Previous	s School attended if an	y. (Attach T	C and Mar	k Sheet)
Name	of the School	ol:			
Last C	lass Attende	ed:			
Date o	f TC:				
Details	s of Siblings	studying in Indian Scho	ool Darsait		
	Sl.No.	Name		Gr. No.	Class and Div.
		DECLARATION	BY PARENT	Γ / GUARDI	AN
I solen	nnly affirm	that all the particulars fu	ırnished in th	is application	on form for admission to
Class 2	X / XII, sub	mitted for my ward Mas	ster/Ms	• • • • • • • • • • • • • • • • • • • •	are
true to	the best of	my knowledge and bel	ief. I hereby	assure that	my ward will abide by the
rules a	nd regulatio	ons framed by the school	l from time t	o time.	
			(Name an	nd Signature	of Parent / Guardian)
Place:			Dat	e:	
AI	DMISSION	DETAILS OF STUDEN	T (TO BE FI	LLED BY P	RINCIPAL'S OFFICE)
Master	:/ Ms			_is admitted	d to Std. X / XII.
Admis	sion. No.: _		Date of a	dmission:	
NIOS	Registration	No:	Da	ate:	
Verifie	ed by Centre	e Supervisor:			
Recom	mended by	Associate Co-ordinator	·		
Appro	ved by NIO	S Programme Co-ordina	ator:		
Fees co					
R.O		(only)			
Signati	ure of Opera	ations In charge:			