



ASHIANA PUBLIC SCHOOL

SECTOR 46-A, CHANDIGARH

Mob:- +91-9872500460

Admission Form

Please paste recent
passport size photograph
of the child

1. Name of Child Male/Female
2. Date of Birth.....
3. Age as on 31st March 2018
4. Aadhaar Number of child.....
5. Admission sought for Class.....
6. Father's Name.....
7. Profession..... Designation
8. Office Name & Address
9. Mother's Name..... Profession
10. Residence Address.....
11. Phone No. Residence
12. Mobile No. (F)..... (M)
13. E-mail id
14. Do you require Bus facility? Yes..... No
15. Is the child suffering from any ailment or disease, if so give details

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Principal

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Parent's signature