The Milestone Senior Secondary School, Kaithal (A Unit of Central Shiksha Prasaran Samiti, Kaithal)

Affiliated to Central Board of Secondary Education, New Delhi, 531433

Sr. Sec. School Achieving milestones together

Milestone

School Code: 41410

Application for Registration/Admission

SUBMISSION OF THIS FROM DOES

Roll No.

NOT ENSURE ADMISSION	(to be filled by office after admission) Photograph of the student to be						
To be filled by the parents & particulars must Admission to be sought in Class Student Registration No.		pasted					
1. Name of the Child (in Block Letters) :							
2. Date of Birth (In Figures)	DD MM YYYY						
(Attach Attested Copy of Birth Certificate)	in i						
		in in its contraction in the con					
	Father's Name (In Block Letters):						
	Mother's Name (In Block Letters):						
	Gender (Male/Female) :						
	Permanent Residential Address :						
Phone No. (Landline)	Mobile No						
Father/Guardian	Mother						
1. Educational Qualification	2. Occupation						
Phone No.	Phone No						

12.	Last School and Class	Attended :					
13.							
	Na			Section	Roll No & Admission No.		

14.	Mode of Conveyance (S	School Bus, Cycle/Any Other			0.5		
	(Upto Class - X : No Child is allowed to drive Scooter/Scooty/Motor-Bike/Car.						
Moped/Scooty (without gear) is allowed only to XI & XII Students having Licence and Helmet is Compulsory for them.)							
15.	If School Bus, Name of	the Stop :					
16.			W				
	b) Specify the Cate	gory (Please tick the correct)					
	, 10 • 661 1.572 · ·						
	i) Hindu	Sikh	Muslim	Christan Ja	in		
	ii) General	SC	BC-A	BC-B BI	PL		
	(If belongs to Re	serve Category i.e.SC/BC/BP	L, Please attach the	copy of Certificate)			
17.	Any Physical Abnorms	ality/Ailment	I				
18.	Any other Relevant In	6) 1650					
		ach the following Documents	•		122		
1		Date of Birth Certificate at the	1100				
3		Andhar UID no of student at		tion ther Competent Authority at t			
3	time of admission. (F		y the D.E.O. or any o	ther Competent Authority at t	ne		
4		Caste certificate (If belongs t	o Reserve Category	i.e.SC/BC/BPL			
			UNDERTAK	ING			
	I certify that the int				and belief Admission of my child may		
be c	ancelled if any informat	ion is found to be false.			*		
	I understand that the	he registration of my child/wa	ird is no guarantee t	admission to the school. I also	agree and understand that the		
adm	ission of my ward shall	be subject to the terms and co	onditions laid down l	y the school from time to time	4		
			8				
				40 HO (1580 050 0)			
Date			N	Iother's Signature			
	(DF	CICTDATIONAL	MICCION	EE MON DEELIND	ADVEN		
	(KE	GISTRATION/AL	MISSION-F	EE NON REFUND	ABLE)		
Adm	itted to Class:						
Class	s Incharge ·	A	dmission Incharge		Principal		
Fee I	Recieved Rs	vide receipt	no	Dated			