



The Indian Heights School

(Senior Secondary)

Recognised and Affiliated to CBSE

Sector - 23, Dwarka, New Delhi - 110077

Phone: 45586511, 12, 14, Fax: 45586513

Email: theindianheights@gmail.com

Website: www.theindianheightsschool.com

REGISTRATION FORM

(TO BE FILLED IN CAPITAL LETTERS)

REGISTRATION NO.:

(To be filled by school)

SESSION :

ENROLMENT FOR CLASS :

Passport size
Photo of
Student

Passport size
Photo of
Father

Passport size
Photo of
Mother

PERSONAL DATA OF STUDENT

Aadhar No. of the Student _____

First Name _____ Middle Name _____ Last Name _____

(To be filled in Block Letters)

Date of Birth (DD/MM/YYYY)

Age as on 31st March 20____ Years Months Days

Gender : Male Female Transgender Nationality _____ Religion _____

Category: General EWS Others

Present Address _____ Permanent Address _____

Telephone Number: Landline _____

Mobile: _____

PLEASE TICK THE OPTIONS BELOW:

- a) Aerial Distance UPTO 1 KM
- (Refer map on 1 - 3 KM
- school website) 3 - 6 KM
- Beyond 6 KM

b) Sibling studying in the The Indian Heights School Yes No

c) Staff Ward Yes No

FOR OFFICE USE ONLY: (Points Alloted)

INFORMATION ABOUT PREVIOUS CLASS:

Name of Play School/Formal School, child last attended/is attending at present _____

SIBLING DETAILS

Name of Sibling	Real Brother/Sister	Class	Name of School	Admission No. (If in TIHS)

PARENTAL INFORMATION

Parent Details	Father	Mother	Guardian
Name			
Date of Birth			
Aadhaar No.			
Qualification			
Occupation			
Designation			
Annual Income			
Office Address			
Landline No.			
Mobile No.			
Email ID			

MEDICAL INFORMATION

Orthopaedic / Speech / Hearing impairment, if any.

Does the child have some special needs / any other medical issue?

If yes, give details and attach the relevant documents _____

IS THE SCHOOL TRANSPORTATION REQUIRED?

Yes

No

The school buses ply on specific routes only. Please check the areas covered by the school transport.

UNDERTAKING

I _____ father/mother/guardian of _____

hereby declare that information given above by me is based on facts and authentic records. Admission of my child may be cancelled if any information is found to be incorrect.

Date: _____

Father's Signature

Mother's Signature

Guardian's Signature

INSTRUCTIONS

- Self attested photocopy of following documents to be submitted along with Registration Form :
 - Birth Certificate of the child.
 - Domicile Certificate of child or of his/her parents.
 - Proof of Residence (any one- Aadhar Card/ Voter ID card/Ration Card/Passport/Electricity Bill/Telephone Bill/Water Bill).
 - Copies of authenticated documents (if any) in support of specific criteria in which parent is applying.
- The application made herein does in no way entitle the candidate for the admission to the school. The decision of the Principal/Admission Committee in all regards will be final and binding.
- Incomplete forms are liable to be rejected without any intimation.

Principal