

## ARMY PUBLIC SCHOOL ASC CENTRE & COLLEGE BANGALORE REGISTRATION FOR ADMISSION (AY 2024-2025)

Affix Recent Passport Size Photograph

**Serial No** 

| 1.  | Name of the Child (IN BLOCK LETTERS)   | :          |                 |                      |                    | l             |  |
|---|--|------------|-----------------|----------------------|--------------------|---------------|--|
| 2.  | Gender (Please Tick)   | :          | Male            | <u></u>              | Female             |               |  |
| 3.  | Date of Birth (DD/MM/YYYY)   | :          |                 |                      |                    |               |  |
|   | Age as on 1 <sup>st</sup> April 2024   | :          | <u>Years</u>    | <u>Months</u>        | <u>Days</u>        |               |  |
| 4.  | Aadhar No  | :          |                 |                      |                    |               |  |
| 5.  | Mother's Name (IN BLOCK LETTERS)   | :          |                 |                      |                    |               |  |
| 6.  | Father's Name (IN BLOCK LETTERS)   | :          |                 | ••••                 |                    |               |  |
| 7.  | Unit   | :          |                 |                      |                    |               |  |
| 8.  | Mobile No : Father Mother  |            |                 |                      |                    |               |  |
|   | Father/Mother is in Service/Retired  RMY NAVY AIR FORCE  MES GREF TA PPO No & Date (For Retired Persons only)  Mother's Occupation (If not in Defence) | BSF<br>) : | DSC CA          | A!                   | SSAM RIF  ARMY WII | DEF C         |  |
| 12.<br>13.                                    | Grand Father's Details (ESM of Army only)  Board under which studied (Please Tick)   | A<br>N     |                 | ICS                  |                    |               | it                                     |
| 14.   | Stream applied for (with subjects) (Only f   |            | L               |                      |                    | JAIL          |  |
| 1 <sup>st</sup> Cl                            | noice  |            |                 |                      |                    |               |  |
|   | Choice   |            |                 |                      |                    |               |  |
| <ul><li>15.</li><li>16.</li><li>17.</li></ul> | Previous Class studied with Subjects  Name of School Previously studied with Address  Any Special/Medical needs of student                             |            |                 |                      |                    |               |  |
|   | RESIDENTIAL ADDRESS  |            |                 |                      | <u>0</u>           | FFICE ADDR    | <u>ESS</u>                             |
|   | il IDof Submission :   |            |                 | Signatur             | re of the Dar      | ent/Guardian  |  |
|   | Note: Submission :   | is no      | t assuranc      | _                    |                    | ent/Guardian  |  |
| (FOR OFFICE USE ONLY)                         |  |            |                 |                      |                    | <u>Serial</u> | <u>No</u>                              |
| Name of Pupil                                 |  |            |                 | . Name of the Father |                    |               | ······································ |
| Phone No                                      |  |            |                 | '                    |                    |               |  |
| Class   | s applied for  |            | Previous School |                      |                    |               |  |