GURU NANAK PUBLIC SCHOOL

SARABHA NAGAR

LUDHIANA

APPLICATION FOR REGISTRATION AS BOARDER

Α	DMISSION TO CLASS	SESSIO	N		
1.	NAME OF THE CHILD		_		
2.	DATE OF BIRTH GENDER MALE/FEMALE				
	(Photostat copy of the original birth certificate to be attached)				
3.	PERMANENT RESIDENTIAL ADDRESS				
4.	PREVIOUS SCHOOLING				
S.NO	NAME OF THE SCHOOL AND PLACE	CLASSES STUDIED	PERIOD From To	STATUS OF THE SCHOOL Recognised/unrecognised	Boarder/ Day Scholar
	1				
5.	Medium of instruction in previous school(s)				
6.	(a) Nationality (b) Mother Tongue			_ (c) Religion	
7.	Medical certificate by a doctor, giving details of the general health of the child and also of the medication (if any prescribed)				
	Medical certificate to clearly ment	ion drugs/n	nedicines chil	d is allergic to.	
	Duly completed Registration Forn 1000/- drawn in favour of <u>Guru N</u>		-		aft of Rs
	1000/- uruwn m javour oj <u>Guru N</u>	<u>unuk Public</u>	<u> SCHOOL COMN</u>	<u>milee payable at Luamana.</u>	