RISHABH PUBLIC SCHOOL

(Sr. Secondary Recognised & Affiliated to C.B.S.E. Delhi)
Pocket – IV, Mayur Vihar Phase - I, Delhi -110091   Ph: 011-41671411, 9560330216
Visit us: www.rishabhpublicschool.com

Regn. No. …………………….

REGISTRATION FORM (2026-27)
(PRE-SCHOOL AND PRE-PRIMARY)

Recent Photograph of Student	Recent Photograph of the Father	Recent Photograph of the Mother

1. Name of Student (Please leave one box after every name and write in block letters)

(FIRST NAME)　　　　(MIDDLE NAME)　　　　(LAST NAME)

2. (a) Date of Birth　Date　Month　Year

In words _____　　Y　M　D

(b) Age as on 31ˢᵗ of March 2026 -

[Tick the appropriate]

3. Gender : Male ☐　Female ☐　4. OBC/SC/ST * : ☐

Nationality *: ……………………………..　　Mother Tongue of the student *: ……………………………

5. Name of School last attended, (if any): ………………………………………………………………………………………

6. Residential Address: _____

_____ Pincode : ☐☐☐☐☐☐

Telephone No. (Residence) : _____ **Mobile No. :** _____

7. DETAIL OF PARENTS

Particulars (in Block Letters)	Father	Mother
Name		
Qualification *		
Occupation/Profession *		
Designation (if applicable) *		
Office Address		
Office Telephone No.		
Mobile No.		
E-mail ID		
Annual Income *		

	FOR OFFICE USE

8. NEIGHBOURHOOD

0 km to 10 km : ☐

Above 10 km : ☐   (Tick whichever is Applicable)

9. SIBLING
a) Is sibling studying in this school?

Yes ☐   No ☐   (Tick whichever is Applicable)

b) If yes, please give the details of the child studying in this school.
(only real brother and sister)

S.No.	Name of the Child	Class & Section
1		
2		
3		

10. STAFF CHILD

Yes ☐   No ☐   (Tick whichever is appropriate)

Name of the Staff: _____

Designation : _____

SCHOOL ALUMNI :EX-STUDENT (ONLY FOR INFORMATION)

a) Father : Yes ☐   No ☐   If yes year of passing class XII: _____

b) Mother : Yes ☐   No ☐   If yes year of passing class XII: _____

(Tick whichever is appropriate)

11. Please tick the appropriate option :-
a). He /She is under medication.   YES____ /NO____
b). He /she is a special need child.   YES____ /NO____
c). The child has a history of any illness.   YES____ /NO____

Note:-

1. Only shortlisted applicants will be invited for verification.
2. If your name is shortlisted, you will be required to visit the school for verification of documents on given date and time.
3. Since there are limited seats available, all applicants cannot be accommodated.
4. After verification of the documents, applicants will be further shortlisted based on points acquired according to the criteria. In case the number of applicants with the same points is more than the number of seats, a draw of lots will be conducted.
5. Admission will be valid only if the applicable fee and charges are paid in full by the prescribed date and time.

Attested photocopies of the following documents are to be enclosed:

1. Birth certificate issued by competent authority (original to be deposited at the time of admission).
2. Documents valid as proof of address.
    i. Ration card/Smart card issued in the name of parents (Mother /Father having name of child)
    ii. Domicile certificate of child or of his/her parents.
    iii. Voter I-Card (EPIC) of any of the Parents.
    iv. Electricity Bill/MTNL Telephone Bill/Water Bill/Passport in the name of any of the parent or child.
    v. Aadhaar Card/UID Card issued in the name of any of the parents.

* **These particulars are only for information. However, any change in point system by Director of Education shall be adopted accordingly.**

Declaration by the Parents

I _____ mother/father of _____ hereby declare that information mentioned above is true and correct to my knowledge and belief. I have read and understood all the provisions of the notification in this regard. In case any information is found false or incorrect on verification, the admission of my ward may be cancelled.

I fully and clearly understand that issue of registration form and its subsequent deposit does not essentially mean admission. I also understand that admission will be done as per rules and order of the Government/Court.

Date: _____   (Mother)   (Father)

Signature of the Parents