

Please paste one copy of latest photograph (Passport Size)

REGISTRATION FORM FOR THE SESSION COMMENCING MARCH

Admission sought to class	Session	as a Boarder / Day Scholar					
Candidate's Details							
Candidate's Name: (In Block Letters)		Boy Girl G					
Date of Birth (In figures):	(In words)						
(NO REQUEST FOR CHANGE IN NAME & DATE OF BIRTH WILL BE ACCEPTED SUBSEQUENT TO CANDIDATE BEING ADMITTED TO YPS)							
Age as on 31st March of the Year of Admissio	nYear	s Months					
Scheduled Caste/Scheduled Tribe/Backward [Tick (3) the relevant category]	d Class/General						
Family Details							
Father's Name :							
Mother's Name :							
Educational Qualifications: Father	Mother						
Occupation of Father:	Mother						
If in service: Rank/Designation :							
If in Army, the IC No. and Rank:							
Department in which serving :							
If in business, nature of Business :							
Address of Business premises :							
Permanent Address							
Permanent Address							
Address for Correspondence							
Postal Address for Correspondence*:							
Distance (in km) from School.;		Pin Code:					
Phone: Office	Residence: STD Co	ode:					
E-mail ID :	Mobile :						

Old YPS Relations							
Name of the real brother/sister studying at Y.P.S. at the time of registration:							
i)	Class			House			
ii)	Class		House				
Is the candidate the son/daughter/grandson/grand daughter of an old student of Y.P.S.? If so, name of the old student and period of his/her stay							
Name		From	То	House			
School Last Attended							
Name of the School		Classes		Period			
				From	То		
					-		
Board for which appeared for Class X (Ten) Examination (For Admission to Class XI)							
Index/Roll No.		Month		Y	Year		
Acceptation							
Is your child suffering from any ailment?							
I have read and understood the Rules and Regulations of the School, and the same are binding on me.							
	Signature of M	lother		Signature of	of Father/Guardian		
Dated I	Full Name	Full Name					
FOR OFFICE USE							
Received a sum of `.	vide School	Receipt No.	Dated				
by Cash/Draft or Cheque No.	Dated		on (name of ban	k)			
	0:		(D:)				
Signature of Office Supdt.	Signature of Bursar	Signatur	e of Director	Sign	ature of Cashier		

REGN. NO