



Yadavindra Public School

Patiala 147 001, PUNJAB INDIA

www.ypspatiala.in

APPLICATION FOR ADMISSION

Candidate's Details

| | |
|---|--|
| Candidate's Name: (In Block Letters) | Boy <input type="checkbox"/> Girl <input type="checkbox"/> |
| Class: | Boarder / Day Scholar:. |
| Date of Birth* (In Figures): | (dd/mm/yy), (In words) |
| | |

Note : No change in name & Date of Birth will be accepted later.

Family Details

| | |
|--|-----------------------------|
| Father's Name : | Educational Qualifications* |
| Mother's Name : | Educational Qualifications* |
| Occupation of Father: | Mother |
| If in service: Rank/Designation: | |
| If in Defence Services, the IC No.& Rank : | |
| Department in which serving : | |
| | |
| If in business, nature of Business : | |
| Address of Business premises : | |

Address for Correspondence

| | | |
|-------------------------------------|------------------|------------------|
| Postal Address for Correspondence*: | | |
| Distance (in km) from School : | Pin Code: | |
| Phone: Office | Residence: | STD Code : |
| E-mail ID : | Mobile : | |

Note : Please attach photocopies (self attested) of items marked*.

Brother / Sister at YPS

Name of the real brother/sister studying at Y.P.S. at the time of admission:

| | | | |
|-----|-------|-------|---------|
| i) | Class | House | A/c No. |
| ii) | Class | House | A/c No. |

OYs' details

Is the candidate the son/daughter of an old student of Y.P.S. ? If so, name of the old student and period of his/her stay

| | | | |
|------|-------|----------------|--------------------------|
| Name | House | Period of Stay | Year of Passing ISC/ICSE |
|------|-------|----------------|--------------------------|

School Last Attended

| Name of the School | Classes | Period | |
|--------------------|---------|--------|----|
| | | From | To |
| | | | |

Board for which appeared for Class X (Ten) Examination:

| | | |
|----------------|-------|------|
| Index/Roll No. | Month | Year |
|----------------|-------|------|

Undertaking

Emergency Contacts

Name, address and relationship of the person/local guardian to be contacted in emergency:

Name:

Relationship:

Address:

Pin Code:

E-mail ID:

Mobile No.:

Phone : Office:

Residence:

Town:

A) Undertaking of Fee Responsibility by Parents

Name, address and relationship of the person responsible for payment of school dues, who must sign the undertaking appended below, talking the responsibility for payment of school dues:-

I son/daughter of
hereby undertake to pay all school dues from time to time in advance, or whenever asked for, by the school authorities, in respect
of my ward son/daughter of

B) Undertaking of Fee Responsibility by Guardian

I son/daughter of
being the local guardian, take the responsibility of paying the school fees of in case of failure
of payment by the parents.

I have read and understood the Rules and Regulations of the School, and they shall be binding on me.

Signature of guardian(s)

Name (s)

Signature of parents

Father

Name of Father

Mother

Name of Mother

Full Name

Relationship with student

Mobile:

Telephone:

STD Code

Office

Residence

Address

E-mail ID:

Subjects Details

Subjects being offered by the student (For Class XI only):

1. English

2.

3.

4.

5.

Undertaking

- We note that the child will have to represent the school in any interschool/state/national competition, if selected as part of the school team in any sports/cultural/co-curricular discipline.
- It will be obligatory on Students/Parents other than YPS Patiala candidates to let the School know the class X (ten) results immediately (NOT later than a FORTNIGHT) after the declaration of results, till when admission will be Provisional.
- We note that admission is provisional, unless previous School Leaving Certificate is submitted.
- We note that Hiking/Trekking is a compulsory activity of the school curriculum.
- We also note that at least one month's notice or a month's fee in lieu of notice is to be paid if we wish to withdraw our son/daughter/ward from the school.

| | | |
|--------------------|----------------|----------|
| Signature (s) | | |
| 1. Father | Address | |
| 2. Mother | | |
| Full Name(s) | | |
| E-mail ID | Phones: Office | |
| Mobile | Residence | |
| | | STD Code |

Undertaking in Respect of Boarder Student

I understand that no change of status from Boarder to Day Scholar in respect of my ward son/daughter of will be permitted under any circumstances.

I also understand that if I wish to change my ward's status at any time, I will have to withdraw my child/ward and seek re-admission as per the school procedure for admission.

| | |
|---------------------------|--------------------------------|
| Signature | Dated |
| Full Name | Phone Office |
| Relationship with student | Residence STD Code |
| Address | E-mail ID |
| | Mobile |

Student Details (for Overseas candidates)

| | | |
|---|------------------|-------------------|
| (a) Nationality | (b) Passport No. | (c) Date of Issue |
| (d) Passport issuing Authority and Place of Issue | | |
| (e) Visa valid upto | | |

FOR OFFICE USE

| | | |
|-----------------------------|-------------------------|-------------------|
| Received a sum of `. | Vide School Receipt No. | Dated |
| by Cash/Draft or Cheque No. | Dated | on (name of bank) |

Signature of Cashier

| |
|----------------------|
| ADMISSION NO. |
| |

| |
|---|
| Admit |
| In Class House as Boarder/Day Scholar |
| with effect from |



Yadavindra Public School

Patiala 147 001 INDIA

REGISTRATION FORM FOR THE SESSION COMMENCING JANUARY

Please paste
one copy of
latest photograph
(Passport Size)

Admission sought to class as a Boarder / Day Scholar

Candidate's Details

| | | |
|---|------------------------------|-------------------------------|
| Candidate's Name: (In Block Letters) | Boy <input type="checkbox"/> | Girl <input type="checkbox"/> |
| Date of Birth (In figures): | (In words) | |
| (No 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 Admission | Years | Months |

Scheduled Caste/Scheduled Tribe/Backward Class/General
[Tick (✓) the relevant category]

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 : | |
| | |

Address for Correspondence

| | | |
|------------------------------------|-----------------|----------|
| Postal Address for Correspondence: | | |
| Distance (in Km) from School | Pin Code: | |
| Phone: Office | Residence: | STD Code |
| E-mail id | Mobile No. | |

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 | To | House |
|------|------|----|-------|

School Last Attended

| Name of the School | Classes | Period | |
|--------------------|---------|--------|----|
| | | From | To |
| | | | |

Board for which appeared for Class X (Ten) Examination:

| | | |
|----------------|-------|------|
| Index/Roll No. | Month | 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 Mother

Signature of Father/Guardian

| | | |
|-------|-----------|-----------|
| Dated | 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 bank) |

Signature of Office Supdt.

Signature of Bursar

Signature of Principal

Signature of Cashier

REGN. NO