

Registration No. : Admission No. : **GAYATRI SHIKSHA NIKETAN , ADITYAPUR****SENIOR SECONDARY SCHOOL**

AFFILIATED TO CBSE, NEW DELHI

AFFILIATION NO: 3430196/2006 SCHOOL CODE: 66389

PHONE : - 0657-2372555, E-MAIL ID – [gnsadityapur@gmail.com](mailto:gnsadityapur@gmail.com)School Website : <https://gnsnschool.in/>**Application Form for Admission to Class XI<sup>th</sup>**

Session : 20\_\_ - 20\_\_



**\*\* Please read the prospectus carefully before filling in the application form. Incomplete or wrongly filled in form will be rejected instantaneously. \*\***

Affix recent  
Passport size  
photographs

1. Name of the Student 

(Full name in BLOCK/CAPITAL LETTER and should tally with those given in the SLC &amp; Admit Card)

2. Date of Birth (In Figure)  (In Words) 3. Place of Birth: Town / Village  Dist.  State 4. Religion  a. Mother Tongue  b. Category : SC  ST  OBC  GEN 5. Permanent Address:  Blood Group:  Sex: Male  Female Present Address: Adhar No. : Mobile No.: E-mail ID : WhatsApp : 6. Annual Income of the parents:  Whether Only Child : Yes  No 7. **Subjects to be offered in the school(Choose any one combination group and put (√) mark):****Subject Combination Group:**Group - A i) English core (301) ii) Physics (042) iii) Chemistry (043) iv) Mathematics (041) / Biology (044) v) Computer Science New (083) Group - B i) English core (301) ii) Physics (042) iii) Chemistry (043) iv) Mathematics (041) / Biology (044) v) Physical Education (048) 

Group - C i) English core (301) ii) Physics (042) iii) Chemistry (043) iv) Mathematics (041) / Biology (044) v) Computer Science New (083)

vi) Physical Education (048) [May be opted as 6<sup>th</sup> paper] 

Group – D i) English core (301) ii) Physics (042) iii) Chemistry (043) iv) Mathematics (041) v) Physical Education (048)

vi) Computer Science New (083) / Biology (044) [May be opted as 6<sup>th</sup> paper] 

Group - E i) English core (301) ii) Physics (042) iii) Chemistry (043) iv) Biology (044) v) Computer Science New (083)

vi) Physical Education (048) / Mathematics (041) [May be opted as 6<sup>th</sup> paper] 8. A. Name of the Previous School attended: B. Name of the Board: 

.....Tear from here .....

**GAYATRI SHIKSHA NIKETAN , ADITYAPUR**

AFFILIATED TO CBSE, NEW DELHI AFFILIATION NO: 3430196/2006

**ADMIT CARD**

Affix recent  
Stamp size  
Photo

Registration No.:  Name  Class Date of form Submission:  Date Of test:  Time:

9. Father's Name:

(Fill in BLOCK/ CAPITAL LETTERS and should tally with those given in the SLC & Admit Card)

Occupation:

a . Name of the Department:  b. Designation:

Phone No.: i) Residence:  ii) Office :  iii) Mobile:

10. Mother's Name:

(Fill in BLOCK/ CAPITAL LETTERS and should tally with those given in the SLC & Admit Card)

Occupation:

a. Name of the Department:  b. Designation:

Phone No.: i) Residence:  ii) Office:  iii) Mobile:

11. Medical Status of Student ( Attach a certificate from a registered medical practitioner) :

12. Name of the Local Guardian:

Address:

Phone No.: i) Residence  ii) Mobile:

**DECLARATION BY THE CANDIDATE**

I hereby solemnly declare that if admitted I shall abide by the rules and regulations of the school / CBSE. Further, I declare that all the statements made above in this admission form are true, complete and correct to the best of my knowledge and belief. I shall hold myself responsible for any eventuality thereof. I shall not request for any change in the subjects offered in future.

Date: .....

Place: .....

*Signature of Candidate*

**DECLARATION BY THE PARENT/ GUARDIAN**

I fully understand that admission of my ward(s) may be cancelled at any time, if any documents/ information furnished at the time of admission is found to be incorrect or fake, I further understand that the fee deposited at the time of admission shall not be refunded at any circumstances.

Date: .....

Place: .....

*Signature of Parent/ Guardian*

**13. Documents to be attached :**

- i) SLC in original with 2 Xerox copies.
- ii) Migration certificate in original. (Only for students from a board other than CBSE)
- iii) Character certificate in original with 2 Xerox copies.
- iv) Xerox copy of Mark sheet and Provisional certificate in 3 copies each.
- v) Medical certificate in original with 2 Xerox copies.
- vi) 2 Passport size Photographs. (One of which should be pasted in the form at prescribed place )

**FOR PRINCIPAL**

Admission Granted:

Admission Rejected:

Date:

**FOR OFFICIAL USE ONLY**

Signature of Principal

Class:

Section:

Roll No.:

Admission No.:

Date of Admission:

*Signature of the accounts officer*

