

Registration Form



BRILLIANTS' CONVENT

West Enclave, Pitampura, Delhi-34.

Senior Secondary Recognised & Affiliated to CBSE

Ph: 2703 2325, 27028625 Fax : 2703 4550

E-mail: bc34@rediffmail.com Web: brilliantconvent.com

Reg. No. BCS/2021-22/ ____

Academic Session 2021 – 22

Child

Father

Mother

- KINDLY FILL THE COMPLETE FORM IN CAPITAL LETTERS ONLY.**

Class to which admission is sought _____

Personal Details :-

1. Name : Aadhar No.

2. Gender : Male Female Any other

3. D.O.B : Date _____ Month _____ Year _____

In words

4. Details of Parent:-

Details	Mother	Father/ Guardian
Name		
Educational Qualification		
Residential Address		
Phone Number		
E-mail		
Occupation		
Office Address		
Annual Income		
Aadhar Number		

5. Whether the candidate is :

- a) Single Girl Child Yes No
- b) Specially abled Yes No
- c) Belonging to the EWS Yes No
(Attach proof wherever applicable)

6. Category: (Attach proof): General SC ST OBC EWS

7. Medical Information : Does the child have some special needs?

If Yes, give details

8. Class last attended

9. Name & Address of the last school attended

10. Details of siblings (if any) (Real brother / sister only)

(Tick the appropriate) Yes No

If sibling studying in the same school give Sibling Name

details Class / Sec

Declaration by Parent

1. I hereby solemnly declare that all the statement made in the above form and documents attached are true to the best of my knowledge and belief . I fully understand that in event of any information being found false or incorrect , registration and admission of my ward may be cancelled without any further notice or discussion .
2. I do understand that the Registration /shortlisting does not guarantee admission to my ward. I undertake to submit all the required documents in original for verification by the school .
3. I agree and accept the process of admission undertaken by the school and will abide by the decision of the school authority which shall be final and binding on me.

Date ___/___/___ Signature of Father _____ Signature of Mother _____

Place _____ Name of Father _____ Name of Mother _____

Enclosures

(Please Tick the submitted Documents)

- Recent coloured passport size photograph of the child , mother & father duly pasted on the form.
- Self attested photocopy of **Date of Birth certificate** of the child .
- **Attested Residence proof and photo ID proof of the parent, Aadhaar card of parent and child , voter Id card of parents , pan Card of parent also.**
- Attested Photocopy of I-card or latest fee receipt of BCS sibling /12th Marksheet BCS Alumni (if Applicable)
- **Attested copy of Caste Certificate i.e SC/ST/OBC(if applicable)**
- **Attach a copy of the relevant document , if the child has any special medical need / disability/ailment (if applicable)**
- Photostat copy of the Report Card issued by the previous school (if applicable)
- Medical fitness of the child by a qualified registered doctor.
- All documents are mandatory at the time of registration.

FOR OFFICE USE ONLY

Date of receiving ___/___/___

Signatures

_____	_____	_____	Points secured	<input type="text"/>
Receiver	Admission In-charge	Principal	Total Points	100