

Please download this form, fill it up legibly and submit in the school office with the requisite registration fee.

RAINBOW PUBLIC SCHOOL
Affiliated to C.B.S.E. (10+2), Delhi
Adarsh Colony, Rudrapur (U.S. Nagar)

Form No. _____

REGISTRATION FORM

(Fill in Block Letters)

1. Name of Pupil _____

2. Mother's Name _____

3. Father's Name _____

4. Date of Birth _____

5. Age as on 1st April 20 _____ Yrs. _____ Months _____

6. Class to which admission is sought _____

7. Class in which presently studying/passed _____

8. Name of last school attended _____

9. Present Address _____

10. Contact No.'s Phone No. _____ Mobile No. _____

11. Siblings studying in Rainbow Public School.

(a) _____ Class _____

(b) _____ Class _____

(c) _____ Class _____

Date: _____

Parents Sign: _____

Leave Blank for Office use

1. Name of Pupil: _____

2. Father's Name: _____

3. Class to which admission is sought: _____

4. Registration No.: _____

5. Registration Fee Paid: _____

6. Date of Entrance Exam _____

Result of Entrance Test: _____

Admission Granted/not granted to Class: _____

Teacher's Sign: _____

Principal's Sign: _____

➤ **[Bring this slip on the day of Entrance Test]**