D.A.V. PUBLIC SCHOOL

SECTOR 8-C, CHANDIGARH

ADMISSION FORM

(Session 2025 - 2026)



Please affix a recent colour photograph of the child

I request you to admit	my son / daughter / ward
	in your school.
The particulars of my son /	daughter / ward are given
overleaf.	
Date:	Signature of Parent/Guardian
Admit to	
Date:	PRINCIPAL

	Name of the Pupil	Father's Name	Date of Birth (in words)	Guardian's monthly Income	
2.	Full Address:		1		
i.	Residence:				
ii.	i. Office: Father		Phone no.	Phone no	
	: Mother		Phone no.	·	
iii	E mail :				
iv	Aadhaar No.: Father:		Mother :		
	Chil	d:			
3.	Name, address and signature of person responsible for payment of fees			f fees	
			Cianatuma of D	oment/Cuendien	

Signature of Parent/Guardian

DECLARATION BY THE PARENT / GUARDIAN

- (a) I solemnly declare that the above particulars are true.
- (b) I have gone through the Prospectus and understood the contents and rule to be observed by my ward. I bind myself and promise through this undertaking that I and my ward will follow the rules and regulations of the school.
- (c) Regarding Fee:
 - I understand the fee structure of the school & agree that except for the security fee, none of the other fees will be refunded.
 - If the student does not want to continue can apply for withdrawal within 5 days of admission taken, clearly stating the reason for the withdrawal.
 - 25% processing charges may be deducted in above case, if applied within 5 days of admission taken.
 - Nothing will be refundable if not applied within 5 days.
 I assure you that I have gone through all the above mentioned points & will abide by the above guidelines.
- (d) I also accept that in all cases the interpretation by the School Principal shall be final and binding .

Date :	Address _	Signature of Parent
	_	