D.A.V. PUBLIC SCHOOL

SECTOR 8 - C , CHANDIGARH

ADMISSION FORM

(Session 2026 - 2027)



Please affix a recent colour photograph of the child

I request you to ac	admit my son / daughter / ward	d		
	in your schoo	1.		
The particulars of my so	on / daughter / ward are give	n		
overleaf.				
Date:	Signature of Parent/Guardian	Signature of Parent/Guardian		
Admit to				
Date:	PRINCIPA	AL		

	Name of the Pupil	Father's Name	Date of Birth (in words)	Guardian's monthly Income		
2.	Full Address:					
i.	Residence :					
			Phone no.	:		
ii.	Office: Father		Phone no.			
	: Mother		Phone no	•		
iii	E mail :					
iv	Aadhaar No.: Father: Mother:					
	Chi	ld :				
3.	Name, address and signature of person responsible for payment of fees					
_			Signature of P	arent/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:		Signature of Parent
	Address	
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