



# COMET MENSA PUBLIC SCHOOL

Dehri, Teh. Fatehpur, Dist. Kangra, Himachal Pradesh (Affiliated to C.B.S.E., New Delhi)

**Registration/Admission Form No.** \_\_\_\_\_ **Adm. No. :** \_\_\_\_\_ **Date:** \_\_\_\_\_

Admission for Academic Session \_\_\_\_\_ Class \_\_\_\_\_ Age at the Date \_\_\_\_\_ (years)

\_\_\_\_\_ (months), Nationality \_\_\_\_\_ Aadhaar No. \_\_\_\_\_ Sex \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth (dd-mm-yyyy) \_\_\_\_\_

Blood Group \_\_\_\_\_ Category (Gen/SC/ST/OBC) \_\_\_\_\_ Annual Income (Rs.) \_\_\_\_\_

Father's Name: \_\_\_\_\_ Profession: \_\_\_\_\_ Pvt. Job  Govt. Job

Mother's Name: \_\_\_\_\_ Profession: \_\_\_\_\_ Pvt. Job  Govt. Job

Brother/Sister's DoB (i) \_\_\_\_\_ (ii) \_\_\_\_\_ E-mail-id \_\_\_\_\_

Phone: Father \_\_\_\_\_ Mother \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Correspondence Address: \_\_\_\_\_

Previous School Details: \_\_\_\_\_

(Reason of withdrawal)

## **For Office Use:**

Enclosed: D.O.B Certificate  School Leaving Certificate  Aadhar Card

Date: \_\_\_\_\_ MR No. \_\_\_\_\_ Amount Paid: \_\_\_\_\_

House Name: (ALPS, ANDES, ROCKIES, PAMIR) \_\_\_\_\_

Choose any option:

Taekwondo (compulsory)  Skating  Dance  Shooting  Music  Cricket

Weight-lifting  Boxing

Teacher Name:

Principal:

(Signature of Parent/Guardian)