



SAGAR INTERNATIONAL SCHOOL

Ayodhya Nagar, Bypass Road, Bhopal

7694013272/ 0755-3983171

sis@sisan.in

www.sisan.in

Danish Kunj Kolar Road, Bhopal

6232881872

sis@sisdk.in

www.sisdk.in

REGISTRATION FORM

S.No.

THE PRINCIPAL
SAGAR INTERNATIONAL SCHOOL

I request that my son/daughter/ward, whose particulars are given below, be registered for admission in class _____ (Session 2019-20)

Please
Affix one recent
Passport size
Photograph
of the Child

CHOICE OF SCHOOL [P/s Tick ✓] _____

SAGAR INTERNATIONAL SCHOOL - BRANCH : Ayodhya Nagar Danish Kunj

Name of the Student : Surname Middle Name First Name

Date of Birth (in Figure) :

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

 General SC ST OBC

Institution last attended :

Gender : M F Mother Tongue Nationality

Father's Name :

Mother's Name :

Occupation : Father..... Mother.....

Annual Income :

Address for Correspondence :

Contact No. : Father (Off.)..... Home.....

Mother (Off.)..... Home.....

Email- ID :

Aadhar No. of Student :

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Details of Sibling (not Cousins):

Sr. No. Name of Child Age Educational Level Current School/ Institution

1.

2.

Certificate from Parents

I hereby certify that to the best of my knowledge, the information furnished in this form is complete in all respects. I very well understand that misrepresentation or omission of the facts will justify the denial/ cancellation of admission or expulsion at any stage.

Name of the Parent/ Guardian Signature with Date :

Acknowledgment

S.No.

Received the registration form No. from.....

for class

Dated

For : Sagar International School
Ayodhya Nagar/ Danish Kunj