Form No. ☐

TAGORE PUBLIC SCHOOL

(RECOGNISED AND AFFILIATED TO C.B.S.E.)
D- BLOCK, NARAINA VIHAR, NEW DELHI - 110028 Phone: 40078486, 45044091

NURSERY REGISTRATION FORM

(Issue of Registration form does not ensure admission)

SESSION – 2026-2027

Date of Issuing of form: _____ Registration No.:_____

IMPORTANT INSTRUCTIONS

- Kindly download and fill the complete form in BLOCK LETTERS with Blue ball point pen.
- Form with Cutting & Overwriting will not be accepted.
- The same must be submitted at the School Reception from Thursday, 04th December 2025 to Saturday, 27th December 2025 between 8:30 a.m. to 1:30 p.m.

Affix Passport Size Photograph with name and current date

1. Name of the Child:_____

2. Gender (Male/ Female): _____

3. Date of Birth (Figures): _____

In words : _____ _____

4. Age as on 31st March, 2026 _____ Years _____ Months _____ Days

5. Aadhar Card Number of the Child:_____

6. Any brother/ sister studying in this school: Yes ☐ No ☐

If yes, Name _____ Class _____

7. Residential Address_____

_____

8. Approximate Distance of student's residence to School: Less than 1 km ☐ Between 1-3 kms ☐

Between 3-6 kms ☐ More than 6 kms ☐

9. Any other **Important Information/ Medical history** of the child_____

_____

_____

10. Family details

	Father	**Mother**
Name	: _____	_____
Educational Qualification	: _____	_____
Profession/ Occupation	: _____	_____
Organization Name	: _____	_____
Designation	: _____	_____
Office Address	: _____	_____
	: _____	_____
Mobile No.	: _____	_____
E mail ID	: _____	_____
Aadhar Number	: _____	_____
Whether Alumni	: _____	_____

DECLARATION BY PARENT

We understand that the submission of **Registration Form does not** guarantee admission. It will depend on availability of seats and will be as per guidelines of Directorate of Education.

We also certify that the particulars filled above are correct. We agree that the admission of our ward, **if granted,** will be cancelled if any of the information filled by us is found to be false / incorrect.

Signature of Father: _____

Date: _____ **Signature of Mother**: _____

Registration Fee: Rs 25/ - (Cash / Online) **Online Reference Number: _____**

Date of Submission_____ **Signature of Office Incharge_____**

NOTE: Kindly attach the **self-attested photocopy with date** of the following documents:

- **Date of Birth Certificate of the child**
- **Residence Proof** (Aadhar Card /Voter I-Card / Ration Card issued name of parents/ Utility Bill)
- **Proof of Parent Alumni (if applying under Parent Alumni Category-** Class XII Marksheet/ Certificate**)**