



ONLY FOR NURSERY (Entry Class)

Sr. No. _____

**ANKUR SCHOOL, A UNIT OF STUDENT AID SOCIETY,
PANJAB UNIVERSITY CAMPUS, SECTOR-14,
CHANDIGARH -160014,
AFFILIATED TO CBSE, NEW DELHI
TELEPHONE NO. 0172-2545792, 7814302943, 7814302942
E-MAIL - ankurschool.pu.chd@gmail.com,
WEBSITE- www.ankurschool.in**

REGISTRATION FORM

SPACE FOR PHOTOGRAPH

Firmly affix photograph
of the Child with parents
(latest) indicating the name of
the child along with the date of click
of the photograph (dimensions
35 mm x45 mm)

PLEASE FILL THE FORM IN CAPITAL LETTERS ONLY

1. (Tick ✓ the correct option)

Ward of Panjab University employee	Ward of Non- University employee	Sibling in Ankur School	Ward of Ankur School Staff	Ward of Alumni	Twin Case
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Admission required in class _____

3. Name of the student _____

(BLOCK LETTERS)

4. Gender: (Please Tick) Male ☐ Female ☐

5. Date of Birth (In Figures)

(In Words) _____

6. Blood Group _____

7. Nationality _____

8. Category GENERAL ☐ SC ☐ ST ☐ OBC ☐ OTHERS ☐

9. Religion _____ Mother Tongue _____

PARENTS' INFORMATION:

10. Father's Name

Dr./Mr./_____ (First Name) _____ (Middle Name) _____ (Surname)

Father's occupation (Govt/ Private/Business) _____

Company/ Department Name _____

Designation _____

Office Address _____

Office Phone No. _____ Personal Mobile No. with whatsapp _____

E-mail _____

11. Mother's Name

Dr./Mrs./_____ (First Name) _____ (Middle Name) _____ (Surname)

Mother's occupation (Govt./ Private/Business) _____

Company/ Department Name _____

Designation _____

Office Address (if any) _____

Office Phone No. _____ Personal Mobile No. with whatsapp _____

E-mail _____

Landline (if any) _____

Personal Residence Address (Local) _____

Guardian (if any) please tick Yes ☐ NO ☐

12. Guardian's Name:

Dr./Mr./Mrs. _____ (First Name) _____ (Middle Name) _____ (Surname)

Guardian's occupation (Govt./ Private/Business) _____

Company/ Department Name _____

Designation _____

Office Address (if any) _____

Office Phone No. _____ Personal Mobile No. with whatsapp _____

E-mail _____

Landline (if any) _____

Personal Residence Address (Local) _____

13. Emergency Contact No. _____

14. Gross Annual Income of the Family -

Father- (In Words) _____

(In Figures) _____

Mother- (In Words) _____

(In Figures) _____

TOTAL INCOME - (In Words) _____

(In Figures) _____

15. Provident Fund Number (In case of Panjab University Employee) _____

16. SIBLING INFORMATION (Real Brother/Sister presently studying in Ankur School, Panjab University Campus, Sector -14 Chandigarh)

Sr. No.	Name of the sibling	Year of admission	Gender	Age	Class	Section	Admission No.

17. Staff Information - (ANKUR SCHOOL)

Name	Relation with the child	Date of joining the school	Designation	No of years at Ankur School	Regular/ Non Regular	Phone No.

18. FAMILY INFORMATION

Student lives with : Both parents ☐ Mother ☐ Father ☐ Guardian ☐

19. ALUMNI (Parents Only)

Name of the Parent (Father/ Mother)	Year of admission and class studied		Year of leaving Ankur School	Present status / occupation	Address	Phone No.
	Year	class				

20.Documents Required :-

DOCUMENTS FOR UNIVERSITY EMPLOYEES	DOCUMENTS FOR GENERAL APPLICANTS (NON UNIVERSITY EMPLOYEES)
<p>(i) Birth Certificate of the child with name</p> <p>(ii) Residence Proof (Parent)</p> <p>(iii) Firmly affix photograph of the child with parents (latest) indicating the name of the child along with the date of click of the photograph (dimensions 35 mm x45 mm) . Photo should have been clicked within 1 month of the submission of this form.</p> <p>(iv) Photocopy of the Immunization Card</p> <p>(v) Aadhaar Card of the child (Optional)</p> <p>(vi) University Employee must attach a copy of joining letter of the job</p> <p>(vii) Latest salary statement with P.F No.</p>	<p>(i) Birth Certificate of the child with name</p> <p>(ii) Residence Proof (Parent)</p> <p>(iii) Firmly affix photograph of the child with parents (latest) indicating the name of the child along the date of click of the photograph (dimensions 35 mm x45 mm) . Photo should have been clicked within 1 month of the submission of this form.</p> <p>(iv) Photocopy of the Immunization Card</p> <p>(v) Aadhaar Card of the child (Optional)</p>

Certified that the information provided by me is true to the best of my knowledge.

LAST DATE OF SUBMISSION OF COMPLETE REGISTRATION FORM IS DECEMBER 20, 2023 (Wednesday).

Signature → Father _____ Mother _____ Guardian _____

DATE...../...../.....

21.NOTE:- In-service University Employee must submit his/her form with the consent of his/ her Head of the Department /Branch.

(TO BE FILLED IN CAPITAL LETTERS ONLY)

This is to certify that Mr. /Mrs. /Dr. _____ who has applied for admission of his/her ward in Ankur School is a permanent/ temporary employee /daily wager in the _____ Department /Branch of the Panjab University since _____ Date _____.

his/ her P.F No. _____

Head of the Deptt./Branch

Signature of the Head of the Deptt./Branch with Stamp

(NAME IN CAPITAL LETTERS)

TO BE FILLED IN BY THE PARENTS (IN CAPITAL LETTERS)
(TO BE ATTACHED WITH THE FORM)

REGISTRATION FORM NO. _____

CLASS - NURSERY

Name of the Child _____
Date of Birth of the child _____
Father's Name _____
Mother's Name _____
Guardian's Name _____

(Tick / the correct option)

Ward of Panjab University employee	Ward of Non-University employee	Sibling in Ankur School	Ward of Ankur School Staff	Ward of Alumni	Twin Case

DRAW ON JANUARY 20th 2024 (SATURDAY) AT 10:30 A.M.

Admission Incharge _____

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(TO BE ATTACHED WITH THE FORM)

REGISTRATION FORM NO. _____

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