



ONLY FOR NURSERY (Entry Class)

Sr. No. _____/25

ANKUR SCHOOL SENIOR SECONDARY CO-EDUCATIONAL SCHOOL AFFILIATED TO CBSE, NEW DELHI PANJAB UNIVERSITY CAMPUS, SECTOR-14,CHANDIGARH -160014, TELEPHONE NO. 0172-2545792, 7814302943, 7814302942 E-MAIL – <u>ankurschool.pu.chd@gmail.com</u>, 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 ×45 mm)

PLEASE FILL THE FORM IN CAPITAL LETTERS ONLY

1. (Tick V 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

2. Admission required in Class	
3. Name of the Student	
(BLOCK LETTERS) 4. Gender: (Please Tick) Male	Female
D D 5. Date of Birth (In Figures) (In Words)	

6. Blood Group			
7. Nationality			
8. Category	GENERAL SC	ST OBC OBC	OTHERS
9. Religion		Mother Tongue	
PARENTS' INFO	RMATION:		
10. Father's Na	<u>me</u>		
Dr./Mr	(First Name)	(Middle Name)	(Surname)
Father's occupa	ation (Govt/ Private/Business)		
Company/ Depa	artment Name		
Designation			
Office Address			
	o Personal		
E-mail			
<u>11. Mother's Na</u>			
Dr./Mrs	(First Name)	(Middle Name)	(Surname)
Mother's occup	pation (Govt./ Private/Business) _		
Company/ Depa	artment Name		
Designation			
Office Address	(if any)		
Office Phone No	o Personal N	lobile No. with whatsapp	
E-mail			
Landline (if any)			
	nce Address (Local)		
Guardian (if any) please tick Yes NO	2	

12. Guardian's Name:

Dr./Mr./Mrs	(First Name)	(Middle Name)	(Surname)
Guardian's occupat	ion (Govt./ Private/Business)		
Company/ Departme	ent Name		
Designation			
Office Address (if ar	ען)		
Office Phone No	Persona	Mobile No. with whatsapp	
E-mail			
Personal Residence	Address (Local)		
14. Gross Annual In	come of the Family –		
Father- (In Wor	ds)		
(In Figure	s)		
Mother- (In Wo	ords)		
(In Figure	s)		
TOTAL INCOME	- (In Words)		
15.Provident Fund M	Number (In case of Panjab U	niversity 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	
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19.ALUMNI (Parents Only)

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

20.Documents Required :-

DOCUMENTS FOR UNIVERSITY EMPLOYEES	DOCUMENTS FOR GENERAL APPLICANTS (NON -UNIVERSITY EMPLOYEES)	
 (i) Birth Certificate of the child with name (ii) Residence Proof (Parent) (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. (iv) Photocopy of the Immunization Card (v) Aadhaar Card of the child (Optional) (vi) <u>University Employee</u> must attach a copy of joining letter of the job (Vii) Latest salary slip with P.F No. 	 (i) Birth Certificate of the child with name (ii) Residence Proof (Parent) (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. (iv) Photocopy of the Immunization Card (v) Aadhaar Card of the child (Optional) 	

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

Signature →

Father _____ Mother _____ Guardian _____

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

21.NOTE:- <u>IN-SERVICE UNIVERSITY EMPLOYEE</u> 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 Scl	nool is a <u>permanent/ temporary employee /daily wage</u>
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.____/25

CLASS - NURSERY (ENTRY CLASS)

Name of the Child	
Date of Birth of the child	
Father's Name	
Mother's Name	
Cuardian's Nama	

(Tick V the correct option)

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

DRAW ON 17TH JANUARY , 2025 (FRIDAY) AT 10:30 A.M.

Admission Incharge			
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	D IN BY THE PARENTS O BE ATTACHED WITH	(IN CAPITAL LETTERS) I THE FORM)	1
CLASS - <u>NURSERY</u> (ENTRY CLASS)		REGISTRATION FORI	M NO/25
Name of the Child			
Date of Birth of the child			. <u></u>
Father's Name			
Mother's Name			
Guardian's Name			
(Tick v the correct option)			

Ward of Panjab	Ward of Non- University	Sibling in Ankur	Ward of Ankur	Ward of	Twin
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DRAW ON 17TH JANUARY , 2025 (FRIDAY) AT 10:30 A.M.