



VADIC SR. SEC. SCHOOL, BALLAH (KARNAL)

AFFILIATED TO CBSE (CODE-531838) SCHOOL CODE - 41831

PHONE NO. 70310-28000, 89290-29000, BALLAH (KARNAL)

Website: www.Vadicsrsecschool.com E-mail: Vadicschoolballah@gmail.com

ADMISSION / REGISTRATION FORM

ACADEMIC- SESSION - 2025-2026



Admission No. _____ Date ___/___/_____ SRN No. _____

PEN NUMBER _____ AAPAR ID _____

Class: _____ HOUSE NAME-Pacific/Indian/Atlantic/Arctic

Admitted /Enrolled under Govt. RTE/134A/Cheerag/General Student

Name Of Student: _____

St. Family id _____ Annual Income _____

Date Of Birth _____ Student Aadhaar No. _____

Blood Group _____ Student Height (cm.) _____ Student Weight (KG) _____

Caste: _____ CATEGORY(GENERAL/OBC/SC) Gender(Male/Female)

Contact No.(Father/Mother) _____

Father's Name _____ Mother's Name: _____

Father's Aadhaar No. _____ Mother's Aadhaar No. _____

Father's Qualification: _____ Mother's Qualification _____

Father's Occupation _____ Mother's Occupation _____

Subject :1 _____ 2. _____ 3. _____
4 _____ 5: _____ 6. _____
7 _____ 8: _____ 9. _____

Name of previous school _____ Passing Year _____

Previous Year Result (Pass/Fail) Marks Obtained ____/____ Percentage ____%

No. of days student attended in previous class _____

Address:-V.P.O _____ Tehsil _____ District _____

Pin Code _____

Whether BPL beneficiary (Yes/No)

Whether CWSN (Yes/No)

Is this Student Outside of State (Yes/No) if yes State Name :- _____

I wish my child to be registered for admission. I undertake to pay fees in advance and comply with all the rules and regulations lay down by the school Authorities. If I fail to do so, the name of my child may be struck off at my risk.

SIGN OF STUDENT

SIGN OF PARENTS

SIGN OF CLASS TEACHER

SIGN OF PRINCIPAL