



Shri Agrasen Public School

(AFFILIATED TO CBSE NEW DELHI)

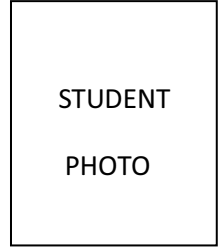
(A SENIOR SECONDARY CO-EDUCATIONAL ENGLISH MEDIUM SCHOOL)

Agrasen Katla, Maharaja Agrasen Marg, Near Sangneri Gate, Agra Road, JAIPUR -302003 (RAJASTHAN)

Phone: 0141-2613922, 8000616557, 8000639760

E-mail: sapsjaipur@gmail.com Website: www.sapsjaipur.ac.in

Admission Form Session 2026-27



Registration No.(To be filled by office)

Class in which admission is sought for Session: 2026-27

1. (a) Full name of the child (in Capital letter):

(b) Gender: Male Female

(c) Aadhar Card No.

2. Date of Birth Day Month Year

In words:

Age of the child as on 31st March 2026 Year Month

3. **Details of Parents:** **Jan Aadhar Cord No.**

Details of Mother/Father	Mother	Father
(i) Name (in capital letters)		
(ii) Occupation		
(iii) Office address with Telephone No.		
(iv) Full residential permanent address with Telephone No.		
(v) Annual Income		
(vi) Aadhar Card		

4. Category : Gen SC ST OBC

5. Status : EWS SG Disabled

Economics weak section Single girl child Physically Challenged
(100000 or less than 100000)

6. Blood Group of the Child.....

7. Name & contact number of local guardian (if any):.....

8. Name & Address of the previous school with class:

9. No. & date of T.C. issued by previous school with status of result:

Name: Father's Name:

Class: Section:

Residence Address:
..... (Mob. No.).....

Payment of Registration fee Date..... Receipt No.....

Form checked by (Signature/Name)

Admission Granted / Refused.....

Signature of Principal

Fees Details:

Particulars	Receipt No.	Date	
Admission Fee			
First Installment			

Signature of Office Accountant

Correct entries from the Admission form to the admission & withdrawal register have been made on page no _____ on dated _____.

Checked By

Signature of Principal