



# DPS SHIMLA

Under the aegis of The Delhi Public School Society – New Delhi

Address: Mehli Junga Road, Panthaghati, Shimla – 171013

Email Id: [administrator@dpsshimla.com](mailto:administrator@dpsshimla.com) Website: [www.dpsshimla.com](http://www.dpsshimla.com)

## ADMISSION FORM

(To be filled in by the School Office)

Registration No.:

Admission No.:

Affix latest  
passport size  
coloured  
photograph

(Use capital letters only)

### PART A

#### Particulars of the child

a. Name in Full Master/Miss \_\_\_\_\_  
First Middle Last

b. Date of Birth \_\_\_\_\_  
Day Month Year

c. No. of Brothers/Sisters \_\_\_\_\_

d. Aadhar Id \_\_\_\_\_

### PART B

a. Mother Tongue: \_\_\_\_\_

b. Home Town: \_\_\_\_\_

c. Nationality: \_\_\_\_\_

d. Special Interest: \_\_\_\_\_

e. Emergency contact person and phone no.: \_\_\_\_\_

**PART C**

**School Particulars:**

- a. Previous School attended, (if any): \_\_\_\_\_
- b. Recognized/ Not recognized: \_\_\_\_\_
- c. Address of the School: \_\_\_\_\_
- d. Original Transfer Certificate submitted/not submitted: \_\_\_\_\_
- e. School Transport is required:    Yes \_\_\_\_\_ No \_\_\_\_\_

**PART D**

**Particulars of Mother**

Affix latest  
passport size  
coloured  
photograph

- 1. Mother's Name:    \_\_\_\_\_  
  First    Middle    Last
- 2. Educational Qualifications: \_\_\_\_\_
- 3. Profession: \_\_\_\_\_
- 4. Designation: \_\_\_\_\_
- 5. Annual Income: \_\_\_\_\_
- 6. Official Address with Telephone No.: \_\_\_\_\_
- 7. Residential Address with Telephone No.: \_\_\_\_\_
- 8. Aadhar Id: \_\_\_\_\_
- 9. Email Id: \_\_\_\_\_
- 10. Area in which you can contribute to the enrichment of the School: (Please put a ✓ against your choice)  
Cultural    \_\_\_\_\_          Academic \_\_\_\_\_          Sports \_\_\_\_\_  
Professional \_\_\_\_\_          Medical    \_\_\_\_\_          Media    \_\_\_\_\_

## PART E

### Particulars of Father

Affix latest  
passport size  
coloured  
photograph

1. Father's Name: \_\_\_\_\_  
First Middle Last
2. Educational Qualifications: \_\_\_\_\_
3. Profession: \_\_\_\_\_
4. Designation: \_\_\_\_\_
5. Annual Income: \_\_\_\_\_
6. Official Address with Telephone No.: \_\_\_\_\_  
\_\_\_\_\_
7. Residential Address with Telephone No.: \_\_\_\_\_  
\_\_\_\_\_
8. Aadhar Id: \_\_\_\_\_
9. Email Id: \_\_\_\_\_
10. Area in which you can contribute to the enrichment of the School: (Please put a ✓ against four choices)  
Cultural \_\_\_\_\_ Academic \_\_\_\_\_ Sports \_\_\_\_\_  
Professional \_\_\_\_\_ Medical \_\_\_\_\_ Media \_\_\_\_\_

## PART F

### DECLARATION BY THE PARENTS

We hereby certify that the information given in the Admission Form is complete and accurate. We understand and agree that misrepresentation or omission of facts will justify the denial of admission or the cancellation of admission. We have read and hereby consent to the Terms and Conditions.

Signature of Father: \_\_\_\_\_

Signature of Mother: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

### INFORMATION ABOUT STUDENT

Admitted to Class and Section: \_\_\_\_\_

Stream (If any): \_\_\_\_\_

House allotted: \_\_\_\_\_

Route No. allotted: \_\_\_\_\_

Stop: \_\_\_\_\_

Name of the Accountant/Cashier: \_\_\_\_\_

Accountant/Cashier's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**FOR APPROVAL**

Name of the Principal/Headmistress: \_\_\_\_\_

Principal/ Headmistress's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**FOR INFORMATION ONLY**

Name: \_\_\_\_\_

Class Teacher : \_\_\_\_\_

Class Teacher's Signature: \_\_\_\_\_

Date : \_\_\_\_\_

**FOR PAYMENTS BANK DETAIL**

Koti Educational Foundation

50200086823693

IFC Code - HDFC0003612

HDFC Bank Meheli