



H M SENIOR SECONDARY SCHOOL

Sheetla Colony, Gurugram - 122001 (HR)

Phone : +91-8506969777

Email : hmgurugram@gmail.com ; Visit us at : www.hmsssggn.com

Reg Form Sr. No. _____

Registration Form/Admission Form

Registration Fees Rs 200 Only

Student's Personal Details :

Photo

Class in which admission is sought: * _____

Name (in Block Letters) * _____

As per DOB & Aadhaar Card

Date of Birth (in Figure) * _____

Place of Birth * _____

Date of Birth (in words) * _____

Age as on 01-04-2024 * _____

Years _____

Month _____

Days _____

Gender * _____

Male / Female

Category * Gen/ SC/ ST/ OBC

Religion _____

Aadhaar No (Child) * _____

Nationality * _____

Blood Group *: _____

Family ID : _____

Residential Address * _____

Name of the last school attended (with year & class) _____

Reason for leaving the previous school _____

Sibling * _____

Yes / No

Name and class of

Child's Name

Adm No.

Class/section

any siblings

studying in HMSSS.

Single Girl Child : Yes / No

Single Parent (Mother):

Yes / No

Whether suffering from any disease/allergy: Yes / No _____

(if yes give details) * _____

Whether the child has some special needs? * _____

Yes / No

If yes then give details: _____

Why do you want to admit your child in HMSSS?*

Hobbies of the child: _____

Details of Parents	Father	Mother
Name (As per Govt. document)		
Qualification		
Designation		
Name of Organization		
Office Address		
Office contact No.		
Personal Contact No.		
Email ID		
Aadhaar Card No.		

Whether transport required. * Yes / No _____ Distance of residence from school (in Km) * _____

If yes kindly mention name of the stop. _____

	INSTRUCTIONS	UNDERTAKING
Please register my ward _____ * in your school. We shall produce the requisite documents in original at the time of admission.	a. Registration does not assure admission. b. Admission is subject to availability of seats and will be offered on merit as per rules. c. Transport facility is available on specific routes. Bus stops are defined and will not be changed to suit the individual's convenience.	I _____ * Father / Mother of _____ * undertake that information given by me is based on facts and authentic records. Admission of my child may be cancelled if any information is found to be false.

Signature
Father/Mother/Guardian

Date: ____//____//____

OFFICE USE :

Correct entries from the admission forms to admission and withdrawal register have been made on page number _____ on dated ____//____//____.

Signature
Accountant

Signature
Admission Incharge

Signature
Principal

Note: In case if a student is from other board, transfer certificates should be counter signed by the competent authority.