



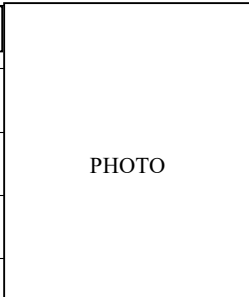
AKBAR PUBLIC SCHOOL REGISTRATION FORM

SECTION A

Reg. No. _____

- 1. Name of Student _____
- 2. Name of Father _____
- 3. Qualification of Father/ Guardian _____
- 4. Profession of Father/ Guardian _____
- 5. Position and Designation Presently held _____
- 6. Business / Office _____

(in capital letters)



Address _____

- 7. Name of Mother _____
- 8. Qualification of Mother _____
- 9. Profession of Mother _____

10. Total monthly income of Parents/ Guardian _____

11. Date of Birth _____ 12. Age _____

13. Address _____

14. Cell # of Father _____ 15. Cell # of Mother _____

16. Telephone # _____
17. Office# _____

18. Admission required in class _____ 19. Religion _____

20. Number of siblings in APS with name & class _____

Note: This form is valid only for Registration, not guarantee for Admission.

Date: _____

Signature of Parent/ Guardian _____

Free of Cost