



OM SAI PUBLIC SCHOOL

COR-Cum-NOC NO - NPD043

AT/PO-KHARIAR, DIST-NUAPADA, ODISHA-766107

BOOK NO.
RECEIPT NO.
DATE OF ADMISSION

/

For Office use only

ADMISSION FORM

Registration for Class

Session

2025-26

Adm. Reg.
Serial No:

/

1. Name of the Student : _____
(In Block Letter)

2. Date of Birth (In Figure) : _____
(In Words) : _____

3. Aadhar Card No. : _____

4. Blood Group : _____ Height (in cm) : _____

5. Sex (Male/Female) : _____ Weight (in kg) : _____

6. Name of the Mother : _____ Mobile No : _____

Aadhar Card No. : _____ Occupation : _____

7. Name of the Father : _____ Mobile No : _____

Aadhar Card No. : _____ Occupation : _____

8. Mother Qualification : _____ Father Qualification : _____

9. Present Address : _____

10. Permanent Address : _____

11. Religion : _____ 12. Category (SC/ST/OBC/GEN): _____

13. Mother Tongue : _____ 14. BPL / APL : _____

15. Name of the Guardian : _____ Contact No : _____

16. Personal marks of Identification. : _____

17. Co-curricular activities (if any) : _____

18. Whether a transfer certificate : _____

Counter signed is attached, (If yes, write its number and date)

DECLARATION

I declare that the statements given above are correct and that the student has not attended any other school besides the mentioned one, I have read all the rules and agree to abide by them. My child may be expelled from the institution on violation of rules.

Verified by
Admission-in-charge

Signature of
Principal

Signature of parents/Guardian
Date: