

# ST. JOHN VIANNEY SCHOOL

Plot No. 1B/SSS-101, Vrindavan Yojana, Ambedkar University P.O.  
Raebareli Road, Utraithia, Lucknow-226025 (U.P.)

## REGISTRATION FORM

809

Form No. .... For Class.....

For the Academic Year .....

Issued on .....

To be submitted on .....

Date of Verification .....

1. Full name of Pupil ..... Boy / Girl  
(In BLOCK LETTERS)

2. Name of Mother .....  
(In BLOCK LETTERS)

3. Name of Father .....  
(In BLOCK LETTERS)

4. Occupation .....

5. Address .....

Phone No. Office..... Residence .....

6. Date of Birth (in Figures) .....  
(in words) .....

7. Age as on 1st, April 20..... Years..... Months..... Days .....

8. Religious Denomination..... Caste .....

9. School last attended with class .....

10. Class to which admission is sought .....

11. Nationality .....

- N.B. 1. Registration is not a guarantee for admission.  
2. Attach Photostate copy of the Birth certificate.

Date.....

Signature of Father/Mother/Guardian

Form No. 809.....

Academic Year.....

Class.....

Name of Pupil .....  
(IN BLOCK LETTERS)

1. The parents of the pupil must come to the school for verification on .....  
between / at..... along with the child.

2. The Original birth Certificate (date of birth) from the village family Register/Nagar Palika/  
Maha Palika or Maternity Hospital / Christian Baptism Certificate must be brought at the  
time of verification.

3. Registration is not a 'Guarantee' for admission.

Date.....

Principal