

DEEPALAYA SCHOOL

No. DSKE/NUR/2026-27/.....

A-14, Kalkaji Extn., Govindpuri, New Delhi-110019

Tel. 011-40561451, 40561452

www.deepalayaschoolkalkaji.edu.in

APPLICATION FORM FOR NURSERY (PRE-SCHOOL) 2026-27

Affix photo of
Student

Affix photo of
Mother

Affix photo of
Father

Affix photo of
Guardian
(if any)

KINDLY FILL ALL THE ENTRIES IN CAPITAL LETTER

Name of the Child.....M/F.....DOB.....
(As per the Birth Certificate of the Child)

Aadhar No. (child)

Mother's Name..... (As per the Birth Certificate of the Child)

Education.....Occupation..... Aadhar No

Email Id.....Mobile No

Address (Present).....

Address (Permanent)

Father's Name (As per the Birth Certificate of the Child)

Education.....Occupation..... Aadhar No

Email Id.....Mobile No

Address (Present).....

Address (Permanent)

Name of Guardian (if any).....Occupation.....

Education.....Occupation..... Aadhar No.....

Email Id.....Mobile No.....

Address (Present).....

Address (Permanent)

Monthly Income of Father.....

Monthly Income of Mother.....

Monthly Income of Guardian.....

Religion.....Nationality.....

Single Parent: Tick one (if applicable)

Father

Mother

Details of Brothers/Sisters studying in Deepalaya School, Kalkaji Extn.

Name.....Class.....Sec..... Adm. No.

Name.....Class.....Sec..... Adm. No.

ENCLOSURES

- 1 Birth Certificate
- 2 Address Proof: Any one of the following of Parents/Students:
Ration Card/Smart Card/Domicile Certificate/Voter I-Card/Electricity Bill/MTNL Telephone Bill/Water Bill/ Passport/Aadhar Card
- 3 Vaccination Card of child
- 4 Passport size photos of child (1)
- 5 Passport size photos of parent /Guardian - (1 each)
- 6 Aadhar Card copy of parents & child
- 7 Community Certificate: for SC ☐ ST ☐ OBC ☐ (If Applicable)
- 8 Minority Certificate (If Applicable)
- 9 Blood Group of the Candidate

DECLARATION

I have the authority to admit my child/ward -----
-----into the school as the parents/legal guardian. I undertake the responsibility of providing any evidence needed to support the information provided here, if necessary for any reason. I declare that the statements provided in this application are correct to the best of my knowledge and if found otherwise, I shall abide by the decision of the management. I agree to abide by the rules & regulations and the fee structure of the school.

Date: -----

(1) Signature of Father -----

(2) Signature of Mother -----

(3) Signature of Guardian -----

TERMS & CONDITIONS

Incomplete registration forms and forms providing incorrect information will automatically stand rejected.

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Office use only

Admitted to ----- Admn. No.----- after verification

Date.....

Verified the documents

Signature of the Admission Clerk

Signature of the Principal