LOVELY PUBLIC INTERNATIONAL SCHOOL

(Govt. Recognized)

Satyam Shivam Sundaram

Education is the real treasure

Address: F-Block, 9/10, Krishna Nagar, Delhi-110 051.
Contact No. : 8920153481
E-mail: krishnanagarlpis@gmail.com, lpskrishnangr@gmail.com
Website: www.lpisschoolkn.org

For More Info.

Registration Date:_____ Registration No: _____

REGISTRATION FORM (2026-27)

Affix photo of Father	Affix photo of Mother	Affix photo of Student

Admission required for the Class :

INFORMATION OF THE CHILD

First Name | Middle Name | Last Name

Gender ☐ Male ☐ Female | Date of Birth DD MM YY | Date of Birth in words

Blood Group | Religion | Nationality

Aadhar No. | APAAR ID | PEN

Category SC/ST ☐ OBC ☐ GEN ☐ OTHERS ☐

Languages known | Mother Tongue

RESIDENTIAL ADDRESS

CORRESPONDENCE ADDRESS

Distance from school (in kms): Preferred Phone Number for school ERP:

FAMILY INFORMATION

*** Father/Guardian:**

Name:	Age:	Nationality:
Educational Qualification:	Institution:	
Occupation:	Office Address:	
Designation:		
Annual Income:	Contact No.:	
Aadhar:	Email:	

*** Mother/Guardian:**

Name:	Age:	Nationality:
Educational Qualification:	Institution:	
Occupation:	Office Address:	
Designation:		
Annual Income:	Contact No.:	
Aadhar:	Email:	

*** Are you a single parent?** Yes ☐ No ☐

*** Any reference from school management member** Yes ☐ No ☐

Name of the member_____ Designation _____

*** Are you a School Alumni/Staff Member?** Yes ☐ No ☐

Studied in_____ branch/school From : Year_____ to _____

* Details of Siblings

Name	Age	Name of the Institution/school	Standard

DETAILS OF PREVIOUS STUDY

Year	School	Standard/Grade	Grade/Marks obtained in final exams

Awards won in Curricular (Academics) & Co-Curricular (Sports/Art/Dance/Music etc).

Note: Submit the given documents along with Registration from at the School Reception:

- ✧ Child's Date of Birth certificate
- ✧ Aadhar Card of Parents & child
- ✧ Medical/Fitness Certificate of child
- ✧ Passport size photos of Parents and child (Two each)
- ✧ PAN Card (Father)

UNDERTAKING

I, hereby declare that I am the bonafide Parent/ Guardian of the student and the information given above is correct to the best of my knowledge. I will abide by the school rules and procedures in all respects. Admission of my child can be cancelled if any information is found to be false.

Date:_____

Father's Signature:_____ Mother's Signature:_____ Guardian's Signature:_____