



HOPE HALL FOUNDATION SCHOOL

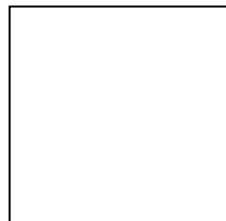
Sector – VII, R.K.Puram, New Delhi – 110022

Ph.: 26197629, 26177628

Web: www.hhfsdelhi.com

REGISTRATION FORM

Registration Number _____



INFORMATION ABOUT THE CHILD

Student's Name:

Date of Birth (DD/MM/YYYY)

Male/ Female

Nationality

Grade for which admission is sought

INFORMATION ABOUT	FATHER	MOTHER	GUARDIAN (if applicable)
Name			
Educational Qualification			
Occupation			
Telephone (Residence)			
Telephone (Work/ Mob)			
Email Id-			
Annual Income			

Address :

.....

.....Tear Here.....

REGISTRATION SLIP

Form No. :

Date :

Received Registration Form from.....Son/ daughter of

..... Class.....You are required to bring your ward

For an interaction/admissions test onat Kindly

produce this slip at the time of the interaction/ admissions test.

Signature of Office Representative

Do you belong to SC/ ST/ OBC ?.....
(If yes, kindly attach a copy of certificate from competent authority)

ACADEMIC BACKGROUND OF CHILD

Name of last school attended.....

Medium of Instruction..... Name of Board.....

Any outstanding academic achievement? (Please specify)

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Any outstanding co-curricular achievement? (Please specify)

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HOW DID YOU LEARN ABOUT HOPE HALL FOUNDATION SCHOOL (please tick):

Word of Mouth

Newspaper Advertisement

Kidz Kingdom

Others (please specify) :

Name of Brother/Sister studying in this School.....

LIST OF DOCUMENTS TO BE ENCLOSED WITH THE FORM

1. Photocopy of Attested Birth Certificate.
2. Copy of previous school's Report Card.
3. Original Transfer Certificate(TC) of previous school duly signed by concerned Educational Department.
4. Two recent passport size photographs of students and parents/guardian.

DECLARATION

I hereby solemnly declare that all the statements made in the above form are true and correct to the best of my knowledge. I also abide by final decision of the school pertaining to the admission of my ward.

Signature of Father/Guardian

Date

Signature of Mother/Guardian

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