

**CRESCENT SCHOOL, DELHI**  
**CLASS NURSERY**

**LIST OF DOCUMENTS REQUIRED AT THE TIME OF REGISTRATION**

**GENERAL INSTRUCTIONS:**

- **USE CAPITAL LETTERS WHILE FILLING UP THE FORM.**
- **FILLED-UP DETAILS MUST BE IN ACCORDANCE WITH THE DOCUMENTS.**
- **FORM WITH OVERWRITING OR CUTTING WILL NOT BE ACCEPTED.**
- **ATTACH ALL THE REQUIRED DOCUMENTS, SELF-ATTESTED BY THE FATHER/ MOTHER.**
- **ADMISSION IS STRICTLY AS PER THE POLICY FORMULATED BASED ON MERIT.**
- **THIS FORM DOES NOT GUARANTEE ADMISSION OF YOUR CHILD.**

**NAME OF THE STUDENT:** \_\_\_\_\_

**FATHER'S NAME:** \_\_\_\_\_ **MOTHER'S NAME:** \_\_\_\_\_

**DOCUMENTS REQUIRED:**

- 1. BIRTH CERTIFICATE (WITH CHILD AND PARENTS NAME)**
- 2. IMMUNIZATION/ VACCINATION CARD**
- 3. AADHAR CARD OF CHILD AND PARENTS (BOTH MOTHER AND FATHER)**
- 4. 2 PASSPORT SIZE PHOTOGRAPH OF STUDENT**
- 5. COMBINED PHOTO OF MOTHER, FATHER & CHILD**
- 6. SIBLING PROOF (IF ANY)**

**DATE:** \_\_\_\_\_ **SIGNATURE OF RECEIVING OFFICER:** \_\_\_\_\_



# REGISTRATION FORM

(To be filled in by the Parents in Capital Letters only)

## FOR NURSERY CLASS

Session: 2026 - 27

Paste Recent  
Passport size  
photograph

Date - \_\_\_\_\_

Reg. No. \_\_\_\_\_

### PARTICULARS OF STUDENT

1. Name of the Student

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2. Aadhar No.

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3. Date of Birth

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(In words)

.....

Age as on 31.03.2026

Year .....

Month .....

Days .....

4. Gender

Male

☐

Female

☐

Others

☐

5. Religion

..... Caste(SC/ST/OBC/GEN) .....

6. Residential Address

.....

..... Contact No. ....

### Detail of Parents

Father's Name .....

Mother's Name .....

Aadhar Number ..... / ..... / .....

Aadhar Number ..... / ..... / .....

Academic Qualification .....

Academic Qualification .....

Occupation .....

Occupation .....

Designation .....

Designation .....

Mobile No. ....

Mobile No. ....

Annual Income (In Rs.) .....

Annual Income (In Rs.) .....

Email Id .....

Email Id .....



### REGISTRATION SLIP

Session - .....

Date - .....

Reg. No. - .....

Name of Student - .....

Father's Name - ..... Mother's Name .....

Verification of the certificate/Test will be held on ..... in the school.

Signature of Receiving officer

**GENERAL INFORMATION**

1. Does the child have any medical disability /special needs? ☐ YES ☐ NO  
(If Yes, Please refer to “**Medical Declaration Form**”)
2. Specific School Parameters -
- A. Distance (From Residence to School) ..... Km (60)
- B. Sibling studying in Crescent School, Maujpur (Real Brother/Sister only) – ☐ YES ☐ NO (20)  
If Yes, give details of sibling  
Sibling Name (s) ..... Class/Sec .....
- C. School Alumni (20)
- I. Father if yes, year of passing : .....
- II. Mother if yes, year if passing : .....

**UNDERTAKING**

I/we ..... father/mother/guardian  
of ..... hereby declares that the above  
information is true and based on authentic records. Admission of my ward may be cancelled if any information is  
found to be invalid.

.....  
**Signature of Parent/Guardian**

# CRESCENT SCHOOL, DELHI

## MEDICAL FITNESS DECLARATION FORM

Name of Student : \_\_\_\_\_

Father's Name : \_\_\_\_\_

Mother's Name : \_\_\_\_\_

Class & Section : \_\_\_\_\_

**Please tick (✓) your answer to each question:**

1. Have your child been hospitalized in the last 24 months? Yes / No
2. During the last 12 months prior to this application, have your ward suffered sickness or injury for which medical treatment has been sought, given or recommended? Yes / No
3. Is he/ she suffering from medical condition, illness, or injury, included sports related injury? Yes / No
4. Is he/ she currently taking any medication/ medicines? Yes / No

**If you have answered YES to any of the above, please provide full details of:**

Medical condition(s) \_\_\_\_\_

& Medication: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Note: Kindly attached Doctor's prescription.

***I acknowledge that my ward is not suffering from any Disease/illness.***

***I indemnify school from any responsibility regarding his/ her health.***

***Information provided above is true and correct to the best of my knowledge and belief.***

Father Signature: .....

Mother Signature: .....

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_