

UTTARAKHAND OPEN SCHOOL, DEHRADUN

Bharti Niketan, Opposite IT Park, Danda lakhond, Sahastradahara Road, Dehradun, Pin- 248001

	High school	Admission I	-orm	
Name of Student's:				
Father's Name :				
Mother's Name:				
Date of Birth:				
Examination:				
Name of the Al Center:				
Subiect Taken:				
Name of Student's:				
	_			'
(Signature of Student)				
(Signature of Student)		L		
		(Signa	ature of Principal) with Offi	ce Seal
	FOR OFFIC	CE USE ONLY		
Certified that		S/0, D/0		
Eligible for admission in			I received admission	fee
Of Rs.	By DD No.		Cash on dated	
Sig. of Controller Regional Centrewith Seal			(Signature of Cashier)	

UTTARAKHAND OPEN SCHOOL, DEHRADUN

निष्ठा धृति : सत्यम UTTARAKHAND OPEN SCHOOL

Bharti Niketan, Opposite IT Park, Danda lakhond, Sahastradahara Road, Dehradun pin- 248001

SELF DECLARATION

I
R/O
F/O
do hereby solemnly affirm and declare as under:
1) that I am the permanent resident of the above said address.
2) that the Date of Birth of my child is
3) that he/she wants to appear in Highschool / Intermediate class for the year
from Uttarakhand Open School
through
4) that i fully understand of the rules, regulations and legal status of the
Uttarakhand Open School

Deponent

Declaration

I solemnly declare that the particulars given above are correct to the best of my knowledge I also understand that if the information provided by me in the form is incorrect, incomplete or false, my application will be rejected upon detection at any stage.

Deponent



4) Photocopy of Previous Qualification 5) Transfer Certificate/ Migration Certificate

UTTARAKHNAD OPEN SCHOOL, DEHRADUN

Bharti Niketan, Opposite IT Park, Danda Lakhond Sahastradahara Road, Dehradun, Pin- 248001

	EXAN	AINATION FORM		
Name of Candidate				
Father's Name				
Mother's Name			Phot atteste	d by
Guardian's Name			Princi	pal
Postal Address				
			(Signature of th	e Student)
Distt.				
State		Pincode I	0:	
E-Mail				
Date of Birth:		Telephon	e No:	
Nationality:		Native La	nguage:	
Previous Qualification	1:	Medium o	f Study:	
Class Applied for:				
Subject Taken:	1)	2)	3)	
	4)	5)	6)	
8th, Xth Board Exami	nation:-			
1) Year of passing:		Roll No:		
3) Name of Board/Co	uncil:			
4) Total amount of fe	e paid:			
Examination Centre a	lloted:			
Name of the affiliated	School:			
Enclosures: 1) Date of Birth Certifica 2) Residence Proof / Aa	dhar Card Copy			
3) 4 Miniature Size Pho	tograph			

Sig & Stamp of the Principal

Sig. of the Principal



UTTARAKHAND OPEN SCHOOL, DEHRADUN

Bharti Niketan, Opposite IT Park, Danda Lakhond Sahastradahara Road, Dehradun Pin- 248001

STATEMENT OF EXAMINATION ATTENDANCE

Examination 20 — 20___

Roll No:	
Name of Student:	
Mother's Name:	Photo
Father's Name	attested by Principal
Date of Birth:	
Name of the Study Centre/School:	
Signature	(Signature of the Students

Controller of Examination

S.No.	Date	Subjects	Signature of the Student	Signature of the Invigilator
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				