



UTTARAKHAND OPEN SCHOOL, DEHRADUN

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

Intermediate Admission Form

Name of Student's:			
Father's Name:			
Mother's Name:			
Date of Birth:			
Examination:			
Name of the AI Center:			
Subject Taken:	1)	2)	3)
	4)	5)	6)
Optional Subjects:			

(Signature of Student)

(Signature of Principal) with Office Seal

FOR OFFICE USE ONLY

Certified that		S/O, D/O	
Eligible for admission in			I received admission fee
Of Rs.		By DD No.	
		Cash on dated	

Sig. of Controller Regional Centre
with Seal

(Signature of Cashier)



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SELF DECLARATION

I..... D/S/O/.....

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 Dehradun

through.....

4) that i fully understand of the rules, regulations and legal status of the

Uttarakhand Open School, Dehradun

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



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EXAMINATION FORM

Name of Candidate

Father's Name

Mother's Name

Guardian's Name

Postal Address

Photo
attested by
Principal

(Signature of the Student)

Distt.

State

E-Mail

Date of Birth:

Nationality:

Pincode No:

Telephone No:

Native Language:

Medium of Study:

Previous Qualification:

Class Applied for:

Subject Taken:

1)

2)

3)

4)

5)

6)

8th, Xth Board Examination:-

1) Year of passing:

Roll No:

3) Name of Board/Council:

4) Total amount of fee paid:

Examination Centre allotted:

Name of the affiliated School:

Enclosures:

- 1) Date of Birth Certificate
- 2) Residence Proof / Aadhar Card Copy
- 3) 4 Miniature Size Photograph
- 4) Photocopy of Previous Qualification
- 5) Transfer Certificate/ Migration Certificate

Sig & Stamp
of the Principal

Sig. of the Principal



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STATEMENT OF EXAMINATION ATTENDANCE

Intermediate Examination 20_20_____

Roll No:	
Name of Student:	
Mother's Name:	
Father's Name	
Date of Birth:	
Name of the Study Centre/School:	

Photo
attested by
Principal

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.				

Please send the statement of attendance with the answer sheets of the examination