वायु सेना विद्यालय बख्शी का तालाब, लखनऊ

**AIR FORCE SCHOOL BAKSHI KA TALAB LUCKNOW**

पिन**/Pin- 226201, Telephone No.- 05222981444, Mobile No.- 8756538184**

ई. मेल**/Email:** **principalafschoolbkt@gmail.com**

**Website:** [**www.afsbkt.com**](http://www.afsbkt.com)

**Registration No. - PS/18/CAC**

 **Admission No.: ………/2024-25**

**ADMISSION FORM: 2024 - 25**

1. Name of Students: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Date of Birth (in figure):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (In Words): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Age as on 01 April: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Year’s \_\_\_\_\_\_\_\_\_\_\_ Months \_\_\_\_\_\_\_\_\_\_Days \_\_\_\_\_\_\_\_\_

4. Nationality \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mother Tongue \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Disability (if any, attach certificate) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Name of Father (With rank if Def Cat): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Annual Income: \_\_\_\_\_\_\_\_\_\_Edn Qualification: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Mother’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Annual Income: \_\_\_\_\_\_\_\_\_\_Edn Qualification: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. Address:

 (a) Residential Address with contact No. (b) Office Address with contact No.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Tele: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Tele: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Class to which admission is sought: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. Result of last examination (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

10. Whether transfer certificate attached: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

11. TC No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Transfer Certificate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

12. Account Holder (Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ A/C Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Bank (Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ IFS Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Branch\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DECLARATION BY PARENTS**

I hereby declare that the above mentioned information in respect of my son/daughter furnished by me is correct.

Parents/Legal guardian Signature

**2**

**AGE PROOF CERTIFICATE BY SERVICE AUTHORITIES**

**TO BE RENDERED BY RESPECTIVE UNIT**

 It is certified that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Full service particulars and section/unit) is a combatant member of Indian Air Force and is presently serving in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (unit/section). The date of birth of his child named \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_as per service documents.

(Quote the POR Authy with Date): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: Sign of Adjt / Asst Adjt

Unit Stamp

Note: Civilian will have to produce a certificate from the appropriate authority as a proof of date of birth of their child, in case of his / her initial admission.

**FOR OFFICE USE: AIR FORCE SCHOOL BKT**

Please admit \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (wards name) to class \_\_\_\_\_\_\_\_\_\_\_\_\_\_ after checking

the relevant papers and realizing the dues.

Date: Sign of Headmistress / Class Teacher

**FOR OFFICE USE ONLY: STN EDN SECTION 38 WG, AF**

It is confirmed that (wards name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ admitted in class \_\_\_\_\_\_\_\_\_\_\_\_\_\_ and have paid

all dues vide fee receipt No.\_\_\_\_\_\_\_\_\_\_\_\_ Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Date: Sign of Exe Dir / AF School Manager