<u>DELHI PUBLIC SCHOOL VASANT KUNJ</u>

HOSTELADMISSION FORM (2025 - 2026)

(TO BE FILLED IN BLOCK LETTERS)

Class / Section		Admission No	Date of Admission
Name of the Hosteller			
Na	me of Parent		
Ad	dress (Resi.)		
(Ot	ffice)		
Tel	. No. (R)	(Mobile)	
(E-	Mail)		
Da	te :		
	ce :		Signature of the Parent
		PARTICULARS OF	LOCAL GUARDIANS
Mi	ss		act as Local Guardians for my ward Master/ The Photographs of the local
gua	ardians duly atteste	ed are pasted below.	
1.	Name		
2.	Address (Resi.)		
	(Office)		
	Tel. No.		(Mobile)
3.	Relationship with	n the Hosteller	
			Signature of First Local Guardian
1.	Name		
2.	Address (Resi.)		
	(Office)		
	Tel. No.	(R)	(Mobile)
		(E-Mail)	
3.	Relationship with	the Hosteller	

CHARACTER CERTIFICATE

(Applicable only for new admission)

I,					Master/Miss
was a bonafide student of this Sc knowledge he/she bears a good mo	on/daughter of Shri hool from the last_			years. To	o the best of my
Date :					
Place:				scł	Principal nool last attended
	<u>UNDERTAI</u>	KING			
I	hereby undertak	te not to cl	aim hostel		
	Signature				
	Name				
	Relationship				
	Address				

<u>UNDERTAKING FROM LOCAL GUARDIAN</u>

I, Loca	ıl gurdia	n of Master / Miss	of Class	Sec		
•	it will b		sickness particularly any infectious divard with me for the period directed l	•		
(1)		-	Signature of local gua	ardian		
			Name (in capital)			
(2)			Signature of local gr	uardian		
			Name (in capital)			
This is	to certif		TE FROM PARENTS			
1.	(i)	My son/daughter possession of any valuables, je given to the ward by me or by	ewellery, watches, etc. I also undertak local guardians.	is not in the that no cash will be		
	(ii)		a-co-curicular and other activities like, dance, etc. to be decided at the discre			
	(iii)	I agree to bear additional expeaceount.	enditure which may be debited to m	ny ward's individual		
2.	during	eby indemnify the school against any damage, sickness, accident, death caused to my ward ng his / her stay in the Delhi Public School, Vasant Kunj Hostel on account of any mishap that be caused inadvertently.				
Date:						
Place:						
Signatu	ıre					
Name	(in cap	ital)				