



MAHARSHI MEHI VIDYAPEETH

(School of Shiksha & Sanskar)

Affiliated to CBSE, New Delhi, Affiliation No: 3430281, School Code: 66472

Managed by: Maharshi Mehi Vidya Vikash Trust

LOHARDIH, KOLAKUSMA P.O.- K.G. ASHRAM, DHANBAD-828109

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ADMISSION REGISTRATION FORM FOR CLASS XI (SESSION 2025-26)

Registration Form Number: _____ Branch: SCI PCM PCB COM ARTS

Issued Date of Registration Form: _____

1. Student Information Section:

Admission Number: _____

Admission Date: _____

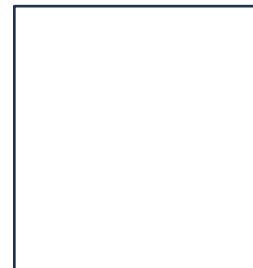
Photographs:



Student's Passport Size Photo



Father's Passport Size Photo



Mother's Passport Size Photo

Candidate's Name: _____

Date of Birth:

• In DD/MM/YYYY: _____

• In Words: _____

Sex: Male Female

Age as of 31-03-2025:

• Years: _____ Months: _____ Days: _____

Nationality: _____

Mother Tongue: _____

Aadhar Number: _____

Caste: GEN OBC ST SC Other

Admission Sought in Class: _____

Stream: Science Commerce Arts

Previous School Details:

- **Board Passed:** CBSE ICSE State Board
 - **Previous School Affiliation Number:** _____
 - **Previous School Name:** _____
 - **Address:** _____
 - **City:** _____
 - **State:** _____
 - **Pin Code:** _____
-

2. Academic Record Section:

Last Academic Result:

Subject	Marks Secured	Grade Secured
English		
Hindi		
Science		
Mathematics		
Social Science		

Aggregate Percentage: _____

Rank in Class: _____

3. Extra-Curricular Activities Section:

Outstanding Extra-Curricular Activities:

Sl. No.	Class	Activity Participated	Level Represented	Achievement
1			<input type="checkbox"/> Class <input type="checkbox"/> School <input type="checkbox"/> District <input type="checkbox"/> State	
2			<input type="checkbox"/> Class <input type="checkbox"/> School <input type="checkbox"/> District <input type="checkbox"/> State	
3			<input type="checkbox"/> Class <input type="checkbox"/> School <input type="checkbox"/> District <input type="checkbox"/> State	

Special Skills: _____

Area of Interest: _____

4. Parent/Guardian Information Section

Father's Name: _____

Mother's Name: _____

Recent Address: _____

City: _____

Pin Code: _____

Mobile Number: _____

Email: _____

Qualification:

• Father: _____

• Mother: _____

Profession:

• Father: _____

• Mother: _____

Organisation:

• Father: _____

• Mother: _____

Designation:

• Father: _____

• Mother: _____

Office Address:

• Father: _____

• Mother: _____

5. Sibling Information Section

Sibling's Name: _____

Class: _____

Session: _____

Admission Registration Number (if applicable): _____

6. Transport Facility Section

Transport Facility Required: Yes No

Preferred Bus Stops:

1. _____
 2. _____
-

7. Parental Contribution Section

Areas of Parental Contribution:

- Music/Dance/Drama
 - Social Skills
 - Painting/Sculpture
 - Academics
 - Public Speaking
 - Communication Skills
 - Bus/Outing Supervision
 - Medical
 - Career Counselling
 - Sports
 - Media/Press
 - Community Programme
-

8. Declaration Section

I hereby declare that the information provided in this form is true and correct to the best of my knowledge. I agree to abide by the rules and regulations of the school.

Signature of Father: _____

Signature of Mother: _____

Signature of Guardian: _____

9. Office Use Section

Checklist for Enclosures:

- | | |
|--|---|
| <input type="checkbox"/> Photograph of Student (4 copies) | <input type="checkbox"/> Father's Photograph (2 copies) |
| <input type="checkbox"/> Mother's Photograph (2 copies) | <input type="checkbox"/> Admission Form |
| <input type="checkbox"/> Transfer Certificate | <input type="checkbox"/> Migration Certificate |
| <input type="checkbox"/> Marks Sheet of Last Examination
Appeared | <input type="checkbox"/> Documentary Proof of Outstanding Achievement |

10. Personality Development Section

Developmental Areas:

Area	Grade
Spoken English	
Personal Appearance	
Neatness	
Courtesy	

Overall Personality Grade: _____

Remarks: _____

11. Admission Order Section

Admission Order by Principal: _____ Signature of Admission In-Charge: _____

Admitted/Not Admitted: Admitted Not Admitted Class: _____

W.E.F. (With Effect From): _____ Remarks: _____

Signature of Principal: _____