

Registration Form

Regn. No. ..5020664

PasswordE3D359

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Admission Sought in .Nursery I	For 2022 - 2023			
Date For Submission Of Form	25 Oct 2021	Time 10:30AM	. Venue	SI. No
ast Name of Child Upadhyay		Firs	t Name of the Child Anaisha	





Admission No.



FATHER

Name



MOTHER

Class



School

SIBLINGS

Sr. No.

CHILD INFORMA	
Date of birth10	Mar 2019. Nationality Indian Gender Male Female Category SC ST Gen
Child with Specia	I Needs O Yes O No Percentage Authentic Certificate O Available O Not Available
Specification	
Complete Reside	ntial Address Flat-1162, Tower-1, Phase-1, ATS Advantage, Indrapuram, Near Indrapuram Habitat Cente
Ghaziabad, In	dia Uttar Pradesh 282001
Residence Distar	uce From School 16.00 KM_Tel. No. 9333330001 Mobile 9333330001 Email anjaliupadhyay10@gmail.co
	cal information about your ward which the school should be aware of
Are you single pa	_
Whether school t	ransport required
If Yes ,Your Re	sidence on school transport route O Yes O No
If No, Are you i	n a position to provide safe transportation to the child to and from the school OYes No
Name of previous	s school / pre-school / Nursery / Cre'che This is her first time going to school
Period of stay,	From
How did you lear	n about Amity?
✓ Through Wor	d of mouthFrom Friend(Priyanka Karla) Through Newspaper Advertisement
Through Inter	net/website
Through Soc	al Media Any Other

PARTICULARS OF MOTHER Full Name Anjali upadhyay	Notionality Indian	Data of hirth (2 Jul 1987	
s the job Transferable O Yes O No	•	Income (INR/Annum)		
Occupation Self Employed Natu				
Organization working for				
Fel. No				
Office Address Flat-1162, Tower-1, Phas				
Ghaziabad Uttar Pradesh India				
Educational Qualifications				
Education Institution atte	ended	Board / University	Year	
X				
XII				
Name of the Institution				
PARTICULARS OF FATHER		s, ir any		
PARTICULARS OF FATHER Full Name Jai Bharat Sharma				
	Nationality Indian		3 Aug 1982	
-ull Name.Jai Bharat Sharma	Nationality Indian Date Of Joining	Date of birth 2	3 Aug 1982 1000000	
s the job Transferable O Yes O No	Nationality Indian Date Of Joining Lure of Business Automotive	Date of birth 2	3 Aug 1982 1000000 el Management	
Full Name Jai Bharat Sharma s the job Transferable ○ Yes ○ No Occupation Business Man/Industrialistatu	Date Of Joining	Date of birth 2	3 Aug 1982 1000000 el Management	
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Full Name_jai_bharat_sharmaRelation to Candidate_father
Occupation Business Man/Industrialisture of Business Automotive Level Middle-Level Management Organization working for .i.trans logistics Designation Director Tel. No. 9990737879 Mobile Email Office Address Flat-1162. Tower-1. Phase-1. ATS Advantage, Indrapuram, Flat-1162. Tower-1. Phase-1. ATS Advantage, Indrapuram and Communications Educational Qualifications Education Institution attended Board / University Year X
Organization working for .i. trans logistics Tel. No. 9990737879 Mobile Email Office Address Flat-1162, Tower-1, Phase-1, ATS Advantage, Indrapuram, Flat-1162, Tower-1, Phase-1, ATS Advantage, I
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Education Institution attended Board / University Year X
X
XII
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Are you in a position to personally support Amity's objective of developing Quality Education in the country. O Yes ONO
If Yes, Give Reason
What is your area of expertise that will contribute to the school ethos of nurturing talent in your ward?
Parents have good vocabulary and communication skills helping the child to learn and communicate fluently.

One of Amity's objectives is excellence in sports. Have you ever been a part of any sports activity on the state, national & international
level? NO
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DOCUMENTS ATTACHED
1. Date of birth certificate 2. Residence proof 3. Proof of transfer
4. Alumni proof 5. Proof of sibling
SIGNATURES
I hereby certify that the information given in the Registration form is complete and accurate. I Understand and agree that misrepresentation or omission of facts will justify the denial of admission, the cancellation of admission, or expulsion.
Signature of Father / Guardian Signature of Mother / Guardian
Date : Date :
Note :On the day of submission of form you have to bring the print out of the Registration form with photographs and self-attested copy of the child's
oirth certificate issued by the Municipal Corporation, residence proof and occupation proof of both the parents.



Registration Slip

Regn. No. 5020664	Password E3D3	359 C	_{lass} Nursery	
Session 2022 - 2023	Child's Name An	aisha.Upadh	yay	
Date of Submission of form	Time	Venue	SI. No	
Transaction No	2347380514		Date .09 Oct 2021	
Date of receipt	Signature	e		

Space For Photograph (Passport Size)

Write
Registration No.
on the back before
affixing

CHILD (APPLICANT)