



Registration Form

BRILLIANT'S' CONVENT

Senior Secondary Recognised & Affiliated to CBSE
West Enclave, Pitampura, Delhi-110034

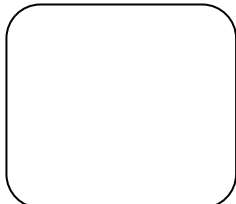
☎ : 9821375278, 9953536647, 9953536649

E-mail: bcs34@rediffmail.com Web: brilliantconvent.com

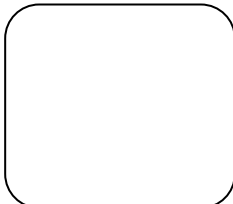


Reg. No. BCS/2025-26/ ____

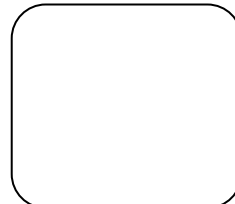
Academic Session 2025-26



Child



Father



Mother

KINDLY FILL THE COMPLETE FORM IN CAPITAL LETTERS ONLY

Class to which admission is sought _____

Details of Student:-

1. Name : Aadhar No.
2. Gender : Male ☐ Female ☐ Any other ☐
3. D.O.B : Date _____ Month _____ Year _____ Blood Group
- In words

4. Details of Parent:-

Details	Mother	Father/ Guardian
Name		
Educational Qualification		
Residential Address		
Phone Number		
E-mail		
Occupation		
Office Address		
Annual Income		
Aadhar Number		

5. Category: (Attach proof): General ☐ SC ☐ ST ☐ OBC ☐ EWS ☐
6. Specially abled child Yes ☐ No ☐
7. Medical Information : Does the child have some special needs?
If Yes, give details
8. Class last attended

9. Name & Address of the last school attended

10. Details of siblings (if any) (Real brother / sister only)

(Tick the appropriate) Yes ☐ No ☐

If sibling studying in the same school give details Sibling Name
Class / Sec

Declaration by Parent

1. I hereby solemnly declare that all the statements made in the above form and documents attached are true to the best of my knowledge and belief. I fully understand that if any information is found false or incorrect, registration and admission to my ward may be cancelled without any further notice or discussion.
2. I do understand that the Registration/shortlisting does not guarantee admission to my ward. I undertake to submit all the required documents in original for verification by the school.
3. I agree and accept the process of admission undertaken by the school and will abide by the decision of the school authority which shall be final and binding on me.

Date ____/____/____ Signature of Father _____ Signature of Mother _____

Place _____ Name of Father _____ Name of Mother _____

Enclosures

(Please Tick the submitted Documents)

1. Recent coloured passport-size photograph of the child, mother & father duly pasted on the form. ☐
2. Self-attested photocopy of **Date of Birth certificate** of the child. ☐
3. **Attested Residence proof and photo ID proof of the parent, Aadhaar card of parent and CHILD, voter ID card of parents.** ☐
4. Attested Photocopy of I-card or latest fee receipt of BCS sibling /12th Marksheet BCS Alumni (if Applicable) ☐
5. **Attested copy of Caste Certificate i.e SC/ST/OBC (if applicable)** ☐
6. **Attach a copy of the relevant document, if the child has any special medical need/disability/ailment (if applicable)** ☐
7. Photostat copy of the Report Card issued by the previous school (if applicable) ☐
8. Medical fitness of the child by a qualified registered doctor. ☐

All documents are mandatory at the time of registration.

FOR OFFICE USE ONLY

CHECKLIST

☐

D.O.B
Certificate

☐

Aadhar of Student, Father, Mother

☐☐☐

Residence
Proof

☐

T.C

☐

Medical
Certificate

☐

Sibling
Proof

☐

Alumni
Proof

Date of receiving ____/____/____

Signatures

Receiver

Admission In-charge

Principal

Points secured

Total Points

100