



# Bethesda Christian Academy

"An Educational Wing of New India Church of God (North) Regd."

1018, Village Bhati, Chattarpur, New Delhi 110074

Contact us: [www.bethesdachristianacademy.in](http://www.bethesdachristianacademy.in)

Phone Number(s): 9999000941; 9999000942

Recent Passport Size  
Photograph  
of the Child

Form No.: (Office Use Only) \_\_\_\_\_ Date : \_\_\_\_\_ Class for Admission : \_\_\_\_\_

Name of the Student (in BLOCK letter): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Blood Group: \_\_\_\_\_ Mother Tongue: \_\_\_\_\_

Religion: \_\_\_\_\_

Category (Attach Proof if Applicable) SC/ST/OBC/Gen: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Pincode: \_\_\_\_\_

Child's Aadhaar Card No: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Nationality: \_\_\_\_\_

Last School Attended: \_\_\_\_\_ Class: \_\_\_\_\_

Is your child differently-abled or has any special needs? (Attach Relevant Document) \_\_\_\_\_

Does your child have any medical condition? \_\_\_\_\_

## Father / Guardian's Details

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Qualification: \_\_\_\_\_

Aadhaar Card No: \_\_\_\_\_

Father's Occupation/Profession: \_\_\_\_\_

Designation: \_\_\_\_\_

Business (Mention what kind of): \_\_\_\_\_

Office Address: \_\_\_\_\_

Mobile No. : \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Email Id: \_\_\_\_\_

Approx Annual Income: \_\_\_\_\_

## Mother's Details

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Qualification: \_\_\_\_\_

Aadhaar Card No: \_\_\_\_\_

Father's Occupation/Profession: \_\_\_\_\_

Designation: \_\_\_\_\_

Business (Mention what kind of): \_\_\_\_\_

Office Address: \_\_\_\_\_

Mobile No. : \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Email Id: \_\_\_\_\_

Approx Annual Income: \_\_\_\_\_

**Declaration:**

We.....(Father) and .....(Mother) of.....  
hereby declare that the above information provided by me/us is correct and I/We understand that if the information is found to be incorrect or false, my/our ward shall be automatically debarred from the selection/admission process without any correspondence in this regard. I/We also understand that the application does not guarantee admission to my/our ward. I/We accept the process of admission undertaken and I/We will abide by the decision taken by the school authorities



.....  
*Father's Signature*

.....  
*Mother's Signature*

.....  
*Guardian's Signature*

*Place:*.....

*Date:*.....

**Documents Required:**

- Please attach a self-attested copy of each document mentioned below;
  - Child's Aadhaar Card
  - Child's Birth Certificate (issued by the Govt. Body)
  - Medical Fitness Certificate (By registered Medical Practitioner)
  - Address Proof (Attach Any 2)
    - Ration Card/ Voter Id Card/ Electricity Bill/ Passport/ Bank Passbook
  - Latest Report Card of the Child (If Applicable)
  - Category Certificate (If Applicable)
- The photo of the child should not be older than 15 days.

**Special Note;**

Please submit the completed application form along with document copies, registration fee and photo to the Admissions Office as per date sheet issued on website.  
Please keep the "Original Documents" along with the Admission form during the time of admission.

✦ **Registration fee of Rs. 50 payable by cash/online on submission of form (Non-refundable).**

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**For Office Use Only:**

Admitted in the Class:.....Sec:.....on:.....

Admission No.....Principal Signature: .....

The School reserves the right to reject invalid forms. The registration form does not guarantee admission