

DON BOSCO SCHOOL - KOKAR - RANCHI
APPLICATION FORM FOR ADMISSION 2026-2027

<p>Family Photograph (Father, Mother & child/children together in one photo)</p> <p>(Paste)</p>	<p>Passport Size Photo of the Candidate</p> <p>(Paste)</p>	<p>FOR OFFICE USE ONLY</p> <p>Registration No.</p> <p>ISC _____2026-27</p>
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(Fill the following in BLOCK letters)

1.	Name of the Candidate:							
2.	Date of Birth:							
		Date		Month		Year		
3.	Date of Birth in words:							
4.	Sex:		5. GEN / SC / ST / OBC					
6.	Religion:		If Christian, specify the Denomination:					
7.	Blood Group:		8. Mother Tongue:					
9.	Permanent Education Number (PEN):							
10.	Aadhar No. of the Candidate:							
11.	In which Class does the student seek admission:							
12.	Name of the School last attended:							
13.	Father's Name:							
	Designation:							
	Office Address:							
	Mobile No.:							
	Aadhar No.:							
14.	Mother's Name:							
	Designation:							
	Office Address:							
	Mobile No.:							
	Aadhar No:							

15.	Residential Address:
	Tel. / Mobile No.:
16.	Permanent Address:
	Tel. / Mobile No.:

17	Is sibling (Real Brother/Sister) studying in Don Bosco School, Kokar? YES / NO <input type="checkbox"/> Name of Real Brother/Sister _____ Cl. & Sec. : _____ Admn. No. _____ Name of Real Brother/Sister _____ Cl. & Sec. : _____ Admn. No. _____
18.	If candidate's Father/Mother is an Alumni of any Don Bosco School / College / Institute: Name of the Institution: <input type="text"/> Year of Studies: <input type="text"/> Class / Course Completed: <input type="text"/> Don Bosco Alumni Registration No: <input type="text"/>
19.	Any Medical History:
20.	Any Loco-motor or learning disability / disorder present in the Candidate: <input type="text"/>

CERTIFICATE

I/We hereby certify 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, the ward shall be automatically debarred from selection /admission process without any correspondence in this regard. I/We also understand that the application / registration / short listing does not guarantee admission to my ward. I/We accept the process of admission undertaken by the school and I/we will abide by the decision taken by the school authorities.

Signature of the Mother

Signature of the Father

Signature of the Guardian

Date:

STUDENT PERFORMANCE CHART

ACADEMIC PERFORMANCE (Attach Copy of Class X Annual/Preboard School Report Card)

CLASS X	AGGREGATE %	ENGLISH	MATHS	PHYSICS	CHEM	BIO	SST	COMPUTER SCIENCE
CLASS X ANNUAL OR PREBOARD RESULTS								

II. AWARDS WON IN THE PAST

Sl. No	AWARD

III. CHOICE OF STREAM (I.Non-Medical / II.Medical / III.Commerce / IV.Humanities)

CHOICE	NAME OF STREAM	SUBJECTS
FIRST CHOICE		
SECOND CHOICE		
THIRD CHOICE		

Signature of Student

Date