

# Allied Schools

Project of Punjab Group of Colleges



## Admission Registration For Physically Disabled Children

Campus: \_\_\_\_\_ City: \_\_\_\_\_ Region: \_\_\_\_\_

### 1. Child's Particulars:

Full Name: \_\_\_\_\_ Gender: Male  Female

Date of Birth: \_\_\_\_\_ Last Class Passed: \_\_\_\_\_ Last School Name: \_\_\_\_\_

Admission Required in Class: \_\_\_\_\_ Year: \_\_\_\_\_ Session: March  August

Nature of Physical Disability\*: \_\_\_\_\_

(\*Attach copy of Medical Certificate)

2. Parent Particulars: Relationship with child: Father  Mother  Custodian

Full Name: \_\_\_\_\_ CNIC No: \_\_\_\_\_

Mailing address: \_\_\_\_\_

\_\_\_\_\_ E-mail: \_\_\_\_\_

Landline No: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### 3. Attachments:

Copy of NADRA Form 'B' (Child)  Copy of Parent CNIC

Copy of Medical Certificate  Last School Certificate (if applicable)

### 4. Declaration by the Parent:

I declare that information given above is true and understand that admission will be subject to clearance of child's Admission Test and Interview, as per Rules.

Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

### For Official Use Only (In-charge Admission Office / Principal)

Particulars and Physical Disability Verified.

Degree of Disability: 25%  50%  75%  100%

Attachments are: Complete  Incomplete  Process

Remarks: \_\_\_\_\_ \*Test / Interview due on: \_\_\_\_\_

Date: \_\_\_\_\_ Name: \_\_\_\_\_ Signature: \_\_\_\_\_

\*Result: Admitted  Not Admitted  Wait  Principal's Signature: \_\_\_\_\_