



DELHI PUBLIC SCHOOL KOLLAM

(Under the aegis of The DPS Society, New Delhi)

Hostel Adm. No.

Date

Grade Div

HOSTEL ADMISSION FORM

Fill the form in BLOCK LETTERS only

Name: Sex: Date of Birth:

Permanent Address:

..... Tel. (Res.):

PHOTOGRAPH
OF THE
STUDENT

Details of the Parents

Name of the Mother: Date of Birth:

Occupation: Email:

Postal Address:

..... Tel. (Res.):

Office: Mobile:

Phone No. to be reached in emergency:

PHOTOGRAPH
OF THE
MOTHER

Name of the Father: Date of Birth:

Occupation: Email:

Postal Address:

..... Tel. (Res.):

Office: Mobile:

Phone No. to be reached in emergency:

Family Annual Income:

PHOTOGRAPH
OF THE
FATHER

Siblings

Name Age School Grade

Name Age School Grade

Name Age School Grade

Details of the Local Guardian

First Guardian

Name of the Guardian: Date of Birth:

Occupation: Email:

Postal Address:

..... Tel. (Res.):

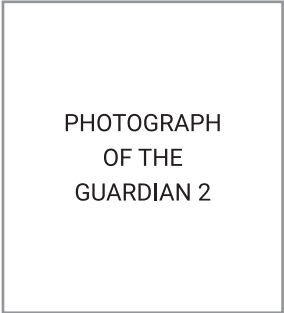
Office: Mobile:

Phone No. to be reached in emergency:

PHOTOGRAPH
OF THE
GUARDIAN 1

Second Guardian

Name of the Guardian: Date of Birth:
Occupation: Email:
Postal Address:
..... Tel. (Res.):
Office: Mobile:
Phone No. to be reached in emergency:



More about your child

1. A balanced diet, vegetarian and non-vegetarian, is provided at the Hostel.

Your child prefers:

(a) Vegetarian food ☐ (b) Non Vegetarian food ☐ (c) Egg ☐

2. Internet access:

(a) Do you wish to permit your child to surf the internet? (maximum 2 hrs / day)

YES ☐ NO ☐

A few lines on the child's temperament (attitude and nature) / hobbies:

.....
.....
.....
.....

3. Specific guidelines to be adhered to regarding:

(a) Health (allergies)
.....
(b) Medical Conditions
.....
(c) Immunization
.....
(d) Any Others
.....

Full Name of the Student	.....	.....	SIGNATURE
Full Name of Mother	.....	.....	SIGNATURE
Full Name of Father	.....	.....	SIGNATURE
Full Name of the Guardian 1	.....	.....	SIGNATURE
Full Name of the Guardian 2	.....	.....	SIGNATURE