

AMITY INSTITUTE FOR COMPETITIVE EXAMINATIONS

Member of the Amity Universe- 1,75,000 Students, 300 Programmes, 30 Campuses

REGISTRATION FORM

[Write in Capital Letters]

Class XI (Synchrostudy Program) 2024-25

Form No.

Father

Please affix a recent
colour photograph

Mother

Please affix a recent
colour photograph

Child

Please affix a recent
colour photograph

STUDENT INFORMATION

Last Name

First Name

Date of Birth

Date of Birth in Words

Age as on 1st April 2024

Years _____ Months _____

Branch for which Admission is sought

SAKET
 PUSHUP VIHAR
 NOIDA
 GURGAON
 MAYUR VIHAR
 VASUNDHARA SEC-6

Nationality

Religion

SC/ST

YES
 NO

Option

Medical
 Engineering

Emergency Contact Telephone Numbers :

FAMILY INFORMATION

Father/Guardian :

Name :		Age :	Nationality :
Educational	Institution / University	Organisation Working for :	
Qualifications 1)		Designation :	
2)		Annual Income :	
3)		Office Address & Tel. :	
4)			

Mother/Guardian :

Name :		Age :	Nationality :
Educational	Institution / University	Organisation Working for :	
Qualifications 1)		Designation :	
2)		Annual Income :	
3)		Office Address & Tel. :	
4)			

FOR OFFICE USE:

Test Date:..... Time..... For Class.....of 2024-25 Session

Date:.....

Signature of Receiver

If parents are divorced, living separately or widowed, with whom is the child living :

Name, Institution and Designation of any family member of child associated with RBEF Institutes.

Brothers / Sisters :

Name :	Age	Institution	Class	Admission No (if in Amity)

PERMANENT ADDRESS :

LOCAL ADDRESS : (IF DIFFERENT)

Name of the Local Guardian (LG)

In case the school provides hostel facilities, would you be interested ? Yes No

Is there any medical information about your ward which the school should be aware of:

What are your reasons for choosing Amity Synchrostudy Program ?

How did you learn about "Amity"?

Through word of mouth: [From whom _____]

Through Newspaper Advertisement: [Name of Newspaper _____]

Through Pre-school: [Name _____]

Any other: [_____]

Note: (1)Only the Registration form should be submitted at the time of Registration, Admission Form and other forms are required only after admission of the child.

(2)Incomplete forms will not be accepted.

(3)Fees once paid is not refundable for any reason whatsoever. Only Caution Money will be refunded after making necessary adjustments as per requirement.

TRANSPORTATION REGISTRATION

Is school Transportation Required ?

YES NO

If yes, pick up point:

Has your ward registered for admission at Amity before:

YES NO

If yes, Year: _____ Class: _____ What was the result?

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REGISTRATION FORM

Last Name of Child

First Name of Child

ACADEMIC BACKGROUND

Previous School: Name of Principal _____ Phone No. _____	Subjects	Marks Obtained (%) CGPA	
		IX Final	X Preboards / boards
Years Attended :	English :		
Any outstanding achievements:	Maths :		
	Science :		
	Social Studies :		
Scholarship awarded if any JSTS / NTSE / Others (Specify)			

CHOICE OF SUBJECTS FOR CLASS XI

SCIENCE STREAM
Compulsory Subjects 1. English 2. Physics 3. Chemistry
Elective Subjects 4. <input type="checkbox"/> Maths <input type="checkbox"/> Information Practices <input type="checkbox"/> P. E. <input type="checkbox"/> Painting 5. <input type="checkbox"/> Biology <input type="checkbox"/> Comp. Science <input type="checkbox"/> Eco. <input type="checkbox"/> Psychology <input type="checkbox"/> Sculpture

Notes :

1. In Elective Subjects, mark order of priority by marking 1, 2, 3 against the subject.
2. Additional subjects available : Commercial Art / Multimedia & Web Technology / P.E.
3. In Science stream you can select either Information Practices or Computer Science only.
4. Subjects allotted in class XI will be at the discretion of School.
5. Enclose copy of the Last Report Card of IX Finals & X Pre boards / Boards.

I / We declare that the information given above is correct to the best of my / our knowledge. However, if any information is found to be incorrect, I / We will abide by whatever decision the school takes.

Date : _____ Place : _____

Signature of the Candidate

Signature of the Father / Guardian

FOR OFFICE USE ONLY

Stream granted	
Electives granted 1.	
2.	
Additional Subject Granted	

Date :

Signature of Principal