

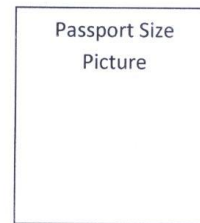
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ANNEX-A

ADMISSION FORM OF CHILDREN HOME

District _____

1. Name of the Child: _____
2. Father's Name and ID No.: _____
3. Mother's Name and ID No: _____
4. Date of Birth/ Age: _____
5. Place of Birth: _____
6. No. & Date of Birth Certificate (copy to be attached if available) _____
7. Religion _____ Child _____ Father _____ Mother _____
8. Address of the Child: _____
9. Parents (Alive/ Dead): Father _____ Mother _____
10. Date and Place of Death: Father _____ Mother _____
11. If Parents alive reason for seeking admission: _____
12. Details of Childs inherited property if any: _____
13. Guardians of the Child Property:



Name	Address	Relationship with the Child	Age	Occupation

14. Particulars of the Childs close relatives/ siblings if any alive:

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Name	Address	Relationship with the Child	Age	Occupation

15. Name, Address and Occupation of the Person applying Admission of the Child and his or her relationship with the child.

Name	Address	Relationship with the Child	Age	Occupation

16. Apparent Physical (Deformity if any): _____

17. Mark of Identification: _____

18. Indicate details (In Referred/ Recommended for Admission by Police or an Agency of or a Person other than Child relatives) _____

19. Personal effects / development level/behavior of the child registered at the time of his/ her admission

- i. _____
- ii. _____
- iii. _____
- iv. _____

20. Whether the Child's Name has already been registered with the District Registrar (Identification Card) if so give number etc: _____

21. Whether the child was admitted in some other Children Home Previously **YES** **NO**

22. If Yes name and Address of the Children Home: _____

23. Reason for leaving the aforesaid Children Home: _____

24. Date of Admission (Aforesaid Children Home) _____ Leaving _____

(Attach relevant documentary record about already admitted in other institution for clause 22, 23 & 24)

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Certified that the above information is correct to the best of my/ our knowledge & belief. I / we also undertake that the child if admitted in the Children Home shall abide by all rules/ regulations and instructions issued by the institution from time to time.

Signature or Thumb
Impression of the Child

Signature/ thumb
impression with the Name
and Address of the Person/
Agency etc. deliver in the
child to the Children Home

For Office Use of the Children Home

Particulars of the Child _____ D/ S/o _____

Of _____ as given above are checked and found correct/ incorrect, thereof the child is admitted/ not admitted in the Children Home. In case of refusal to admit give detailed reason below:-

Registration No. _____ Signature of the Incharge of Children Home _____

Date : _____