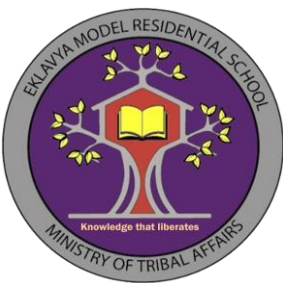




EMRS SOCIETY OF SIKKIM
Under Social Welfare Department
Government of Sikkim



REGISTRATION FORM
FOR CLASS - VI
(SESSION 2025-2026)

Self-Attested
Passport Size colored
Photograph

1.	Name of the Child	
2.	Date of Birth (dd/mm/yyyy)	
3.	Age as on 31.03.2025 Yrs.Months days
4.	Gender (Boy/ Girl/ Transgender)	
5.	Aadhar Number/ Residence Proof	
6.	Blood Group (if available)	
7.	Reservation Category (as per Admission Guidelines)	
8.	Disability Status (Yes/ No)	
9.	Type of Disability and its Percentage (if yes)	
10.	Father's Name	
11.	Mother's Name	
12.	Name of Guardian	
13.	Contact Number	
	Father	

	Mother	
	Guardian	
14.	Address for Correspondence along with PIN	
15.	Occupation	
	Father	
	Mother	
	Guardian	
16.	Class in which currently studying	
17.	Name of the school attending(Present)	
18.	Achievements , if any, in	
	Co-curricular Activities	
	Games & Sports	
	Other Activities	
19.	Preference for Admission in EMRSs of the State	Name of EMRS
	Preference 1.	
	Preference 2.	
	Preference 3.	
	Preference 4.	
20.	Medium of Instruction for EMRSST	
21.	Name of exam centre 1. EMRS Gangyap 2. EMRS Swayem 3. EMRS Suntoley 4. EMRS Parakha	Please tick (✓) the centre you choose.
22.	Are you a drop out of any of EMRSs? If yes, furnish Details:	Yes/ No
	Name of EMRS last studied	
	Year of Drop out	
	Reason for dropping out of EMRS	

23.	Have you ever been rusticated from any school? If yes furnish details.	
	Name of School from where you were rusticated	
	Year of Rustication	
	Reason of Rustication	
24.	I Father / Mother/ Guardian of hereby declare the information provided by me in the application form in respect of my child/ward is true to the best of my knowledge and belief.	
25.	Signature(s) / Thumb impression	
	Father / Mother/ Guardian	
	Child	

For Office use:

1.	Registration Number Allotted	
2.	Date	
3.	Class in which admission is sought	
4.	Name of Child	
5.	Father's / Mother's/ Guardian Name	
6.	Eligibility in terms of Age	Eligible / Not Eligible
7.	Documents found attached in respect of	Tick () Mark
	Date of Birth Certificate	
	Aadhar Card / Residence Proof	
	Domicile Certificate	
	Reservation Category	
	Disability Certificate	
8.	Report Card	
9.	Class V Mark sheet	
10.	Is the Child drop out of any of the EMRSs	
11.	Has the child ever been rusticated	
12.	Eligible for Admission or Not. In case of non-eligibility, mention reason.	
13.	Signature of Dealing hand	

Acknowledgement receipt

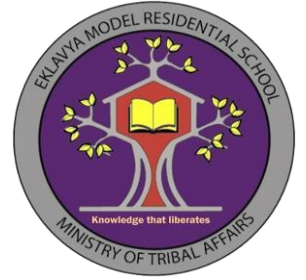
1	Registration Number	
2	Date	
3	Class in which admission is sought	
4	Name of Child	
5	Father's/Mother's/Guardian's Name	

Signature of dealing assistant
Name- Name of
EMRS-

,



Eklavya Model Residential School _____
Under EMRS Society of Sikkim
Social Welfare Department
Government of Sikkim



ADMIT CARD

Student's name-

Exam Centre-

Roll No.

Date of Examination-

Time/duration-

Issuing authority
Name of EMRS