



DELHI PUBLIC SCHOOL HARNI
ACADEMIC SESSION 2018-19

HEALTH AND ACTIVITY CARD
GENERAL INFORMATION

Name of the Student _____

Admission No. : _____ Date of Birth _____

Aadhar Card No of the students : _____

MALE/ FEMALE/ TRANSGENDER _____ Blood Group _____

Mother's Name: _____ Aadhar Card No. _____

Father's Name: _____ Aadhar Card No. _____

Family Monthly Income _____

Address _____

Phone Number : _____

CWSN (Children with Special Needs) Specify _____

SIGNATURE OF PARENTS / GUARDIAN

DATE :