

**\* Duly filled up registration form along with scanned copy of all required documents should be emailed to kvnhpcsingtam.admission@gmail.com on or before 31-Aug-2020.**

Active Mobile No.....  
 Active WhatsApp No.....  
 Active Email ID.....



केन्द्रीय विद्यालय संगठन  
 Kendriya Vidyalaya Sangathan  
 भाग- घ  
**PART-D**  
**फार्म और प्रपत्र**

FORMS AND FORMATS पंजीकरण संख्या

क्रम सं०/S.No

वर्ष/Year **2020-21**



पंजीकरण के लिए कक्षा/Registration for class.....  
 (कृपया (कृ. उचित बाक्स में सही का चिह्न लगाएं/Put tick mark in appropriate box)

प्रथम पाली   
 Ist Shift

या  
 OR

द्वितीय पाली   
 IInd Shift

1- विद्यार्थी का पूरा नाम  
 Name of child in full (in Capital letters).....

पुरुष/स्त्री   
 Sex M/F

2- जन्म तिथि (अंको में)  
 Date of Birth (in figures)  
 दिन/Day      मास/Month      वर्ष/Year

शब्दों में/In words.....  
 आयु 31.03.20 तक  
 Age as on 31.03.2020

वर्ष      मास      दिन      Days  
 Years      Months

3. बच्चे का ब्लड ग्रुप  
 Blood Group of the child

बच्चे का आधार क्रमांक  
 Aadhar No. of the Child

4. छात्र की श्रेणी  
 The category to which child belongs

सामान्य Gen.	भनु जाति SC	अनु.जन.जाति ST	ओबीसी OBC	ईडब्ल्यूएस EWS	बीपीएल BPL	विकलांग Disabled	इकलौती पुत्री S6C
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. क्या अनुसूचित जाति/जनजाति/ओ बी सी से/आर्थिक रूप से कमजोर/बी पी एल/विकलांग/इकलौती कन्या यदि हा तो प्रमाण-पत्र संलग्न करें।/Whether the child belongs to (Gen./SC/ST/OBC/EWS/BPL/Disabled/S.G.) category? Please attach relevant certificate.

6. माता-पिता का ब्योरा/ Details of Mother/ Fatherमाता/ Mother

पिता/Father

(i) नाम/ Name (in Capital letters)

(ii) राष्ट्रियता/ Nationality

(iii) व्यवसाय/ Occupation

(iv) कार्यालय का नाम, पूरा पता व दूरभाष /  
Name of Office and full address  
with Telephone numbers

(v) पूर्ण आवासीय पता व दूरभाष (प्रमाण सहित)  
Full residential address with  
Telephone numbers (with proof)

(vi) विद्यालय से दूरी/ Distance from KV

(vii) स्थाई पता/Permanent Address

(viii) मूल वेतन/ Basic Pay

(ix) 31.03.2020 तक पिछले सात वर्ष के  
सेवा काल के दौरान स्थानांतरणों की संख्या  
No.of transfers during last 7 years as on  
31.03.2020

(x) अभिभावक की श्रेणी रक्षा/केन्द्रीय कर्मी/  
स्वायत्तशासी व अन्य  
Category to which the Parent belong to  
Defence/Central Govt. /Autonomous  
Body & others

मैं एतद द्वारा यह प्रमाणित करता हूँ कि उपर्युक्त प्रविष्टियां मेरी जानकारी मे सत्य हैं।  
I certify that the above entries are true to the best of my knowledge.

अभिभावक के हस्ताक्षर/Signature of Parent

पूरा नाम/Full Name.....

तिथि/Date: .....

पावती/Acknowledgement

क्रम.सं0/S.No.

पंजीकरण संख्या/Registration No.....



**KENDRIYA VIDYALAYA NHPC SINGTAM**

**Option Form for Admission in Class XI (Science / Commerce / Humanities) 2020-21**

*\*Fill in BLOCK LETTERS only.*

CBSE BEARING Roll No \_\_\_\_\_

1. Name of the student \_\_\_\_\_

2. Father's name \_\_\_\_\_

3. Name of the previous school \_\_\_\_\_

4. Marks & Percentage obtained in AISSE 2020 \_\_\_\_\_

5. The cut off percentage for admission in streams would be as under:

**Science – 60 %**

**Commerce – 55%**

**Humanities – Successful Candidates**

**Stream and Subject Combination to be opted:**

Stream	Tick here for stream	Core Subject	Elective Subjects	Tick here for subject combination	Additional Subject
Science		English	Physics, Chemistry, Maths, Computer Science		Physical Education
			Physics, Chemistry, Maths, Biology		
			Physics, Chemistry, Hindi, Biology		
Commerce		English	Accountancy, Business Studies, Economics, Maths		Physical Education
			Accountancy, Business Studies, Economics, Hindi		
			Accountancy, Business Studies, Economics, IP		
Humanities		English	Hindi, History, Geography, Economics		Physical Education

**To be enclosed:** Self attested copy of Mark Statement of AISSE 2020

Signature of the Parent:

Name of the Parent:

Date:

\*\* Scanned Copy of duly filled in Option Form of Admission in Class – XI should be mailed to:

[kvnhpcsingtam.admission@gmail.com](mailto:kvnhpcsingtam.admission@gmail.com)

\*\* No admission will be granted without verification of original Marks Statement.

**OFFICE USE ONLY**

Certified that I have checked/verified Marks Statement and the relevant information are found in order.  
Please promote / admit / re-admit..... to class XI.....  
after checking the relevant papers.

PRINCIPAL

## **LIST OF DOCUMENTS TO BE SUBMITTED**

1. Date of Birth Certificate (For admission in Classes II, III, IV, V, VIII)
2. Class X – Marksheet (preferably Digi-locker marksheet) – For admission in Class XI
3. Social Category – SC / ST / OBC (NCL) (*if applicable*)
4. Service Certificate (*if applicable*)
5. Photo (pasted / scanned) on the Registration form
6. Residential Address Proof
7. Undertaking / Self-Declaration – True Information
8. Undertaking / Self-Declaration - Distance between Residential Address and School
9. Single Girl Child Certificate (*if applicable*)
10. Died in Harness Certificate (*if applicable*)
11. Income Certificate (*if applicable*)
12. TC of previous school (*at the time of admission & physical verification of documents*)
13. Migration Certificate of Class – X (*if Class X passed from any other board than CBSE*)

ANNEXURE – I

**Self-Declaration Format**

I \_\_\_\_\_, Father / Mother of Master / Miss \_\_\_\_\_  
age \_\_\_\_\_ years, resident of \_\_\_\_\_ (complete address),  
do hereby declare that the information given in admission form of the admission in Kendriya  
Vidyalaya \_\_\_\_\_ and in the enclosed documents is true to the best  
of my knowledge and belief and nothing has been concealed therein. I am well aware of the fact  
that if the information given by me is proved false / not true at any point of time, admission will be  
cancelled and I will be liable to legal actions as guidelines of KVS and any benefit accrued by me or  
my ward shall by summarily cancelled.

Date:-

Place:-

Signature of the Parent/Guardian

Self Declaration for distance between school and residence

I ..... father/Mother of .....  
bearing Enrollment No. ....Declare that the radial  
distance between school and our residence is .....km.

Date:.....

Signature of the parent

केन्द्रीय विद्यालय में कक्षा 1 में प्रवेश के लिए प्राथमिकता- 1\* के अभ्यर्थी द्वारा प्रमाण-पत्र/  
 CERTIFICATE FROM PRIORITY - 1\* CANDIDATES FOR ADMISSION IN CLASS I, IN  
 KENDRIYA VIDYALAYAS

में श्रीमती/श्री.....रैंक/पदनाम.....यूनि

ट/पोत/विभाग का नाम ..... एतद्वारा प्रमाणित

करती/करता हूँ कि पिछले सात वर्षों के दौरान मेरा स्थानांतरण एक स्टेशन से दूसरे पर .....

(अंको एवं शब्दों में) बार हो चुका है जिनका विवरण निम्नवत है:

I, (Smt./Shri) \_\_\_\_\_ (Name) \_\_\_\_\_

\_\_\_\_\_ (rank/designation) of \_\_\_\_\_ (unit/ship/

Deptt). do hereby certify that during the past 7 years I have been transferred \_\_\_\_\_ times (in

figures & in words) from one station to another, the details of which are given as under :-

क्र. सं. S. No	फॉर्मेशन/यूनिट/ विभाग/डिपो/ कार्यालय Formation/Unit/ Depot/Office	क्या स्थानांतरित होने पर परिवार सहित गए Whether moved with family	स्थान/ Place	अवधि/Period		ठहरने की कुल अवधि Total Period of stay	स्थानांतरण प्राधिकारी Authority of move
				कब से From	कब तक To		

में यह भी प्रमाणित करती/करता हूँ कि उपर्युक्त तथ्यों के गलत पाए जाने पर मेरे बच्चे को केन्द्रीय  
 विद्यालय में प्रवेश के लिए अयोग्य कर दिया जाए। I further certify that in case the above-mentioned facts  
 are found incorrect, my child will be disqualified for admission to Kendriya Vidyalaya.

स्थान/Place :

दिनांक/Date :

अभिभावक के हस्ताक्षर/ SIGNATURE OF PARENT

# सेवा प्रमाणपत्र / Service Certificate

( केन्द्रीय सरकार / Central Govt.)

प्रमाणित है कि श्री / श्रीमती ..... कार्यालय / मंत्रालय में नियमित कर्मचारी के रूप में कार्यरत हैं। वे रक्षा सेवा / केंद्रीय रिजर्व पुलिस बल / सीमा सुरक्षा बल / एन.एस.जी. / एस.पी.जी / सी.आई.एस.एफ. / केंद्रीय सरकार स्वायत्त संस्था अथवा सार्वजनिक क्षेत्र के उपक्रम, जो पूर्ण या आंशिक रूप से केंद्र सरकार से वित्त-पोषित हैं, के नियमित कर्मचारी हैं तथा उनकी सेवा अस्थानांतरणीय है / पूर्ण भारत में कहीं भी स्थानांतरणीय है।

Certified that Shri/Smt. .... is working as regular employee in the Office / Ministry of .....  
He/She is an employee of Defence Service / CRPF / BSF / NSG / SPG / CISF / Central Govt. / Autonomous Body / Public Sector Undertaking fully financed / partially finance by the Central Govt. and his / her services are non-transferable / transferable anywhere in India.

कार्यालय अध्यक्ष के हस्ताक्षर  
(नाम, पद और कार्यालय की मोहर सहित )  
Signature of head of the Office  
( With Name, Designation and Office Stamp)

स्थान/Place.....

दिनांक/Date.....

कार्यालय का पूर्ण पता और दूरभाष संख्या/ Complete address and Telephone No. of office

.....



# Service Certificate

(राज्य सरकार / State Govt.)

प्रमाणित है कि श्री / श्रीमती ..... कार्यालय / मंत्रालय में नियमित कर्मचारी के रूप में कार्यरत हैं तथा उनकी सेवा अस्थानांतरणीय है / पूर्ण राज्य में कहीं भी स्थानांतरणीय है।

Certified that Shri/Smt. .... is working in the Office / Ministry of ..... and his / her services are non-transferable / transferable anywhere in State.

कार्यालय अध्यक्ष के हस्ताक्षर  
(नाम, पद और कार्यालय की मोहर सहित )  
Signature of head of the Office  
( With Name, Designation and Office Stamp)

स्थान/Place.....

दिनांक/Date.....

कार्यालय का पूर्ण पता और दूरभाष संख्या/ Complete address and Telephone No. of office

.....

# SINGLE GIRL CHILD

Rs. 100/- Stamp paper ( Notary) Affidavit

I.....aged.....years, Indian  
Inhabitant occupation .....Resident of  
..... is mother/father of  
..... Date of Birth..... Submitting  
my undertaking to the Head of the Institution in Class I Vide KVS Admission Guidelines  
2018)

- 1) I hereby declare that Miss..... is the only girl child in my family ( with no male/female sibling). I understand that it shall be my sole responsibility to inform you about any change in status of single girl child in the family immediately, if and when it occurs.
- 2) I am also aware that in case it is detected at any time that the affidavit sworn by me is false, appropriate action will be taken by the school authorities and KVS against me.

Signature of father

Signature of mother

Residential address with  
Contact number:

Solemnly affirmed at .....  
This.....day of.....20.....

BEFORE ME

Explained and Identified by me,

Advocate

## DIED IN HARNESS CERTIFICATE

प्रमाणित किया जाता है कि कुमार / कुमारी..... स्वर्गीय श्री /  
श्रीमती ..... के पुत्र /पुत्री हैं जो .....  
..... (कार्यालय / विभाग) में नियमित रूप से सेवारत थे / थीं और उनका  
देहावसान सेवाकाल की अवधि में दिनांक .....को हो गया था।

Certified that Master/Miss ..... Is the  
son.daughter of Late Sr./Smt. .... Who was  
regular employee of ..... ( Office/Department) and  
he/she died in harness ( while in service) on .....(date).

कार्यालय अध्यक्ष के हस्ताक्षर  
(नाम, पद और कार्यालय की मोहर सहित )  
Signature oh Head of the Office  
(With Name, Designation and Office Stamp)

स्थान/Place.....

दिनांक/Date.....

कार्यालय का पूर्ण पता औरदूरभाष संख्या/ Complete address and Telephone No. of office  
.....