ADMISSION DOCUMENTS:

PM SHRI KENDRIYA VIDYALAYA JAGATSINGHPUR DOCUMENTS REQUIRED FOR ADMISSION IN CLASS-I, SESSION 2025-26

The following documents are to be submitted in original along with **self-attested** copies by the parents whose child will be selected and called for admission. Some of the original documents will be returned after verification.

- 1. Filled in Application Form for Admission The Format may be downloaded from the Vidyalaya Website.
- 2. Filled in Format for Entry in UBI Portal-Format is available in Vidyalaya Website for download & use
- Hard Coy (Print Out) of the Online Application Form: Paste the Colour Passport size photo of the child on it.
- Birth Certificate issued by the competent authority showing date of birth(Keep the Original for verification & attach a photocopy)
- 5. Proof of Residence: Electricity bill/Telephone bill/gas connection or gas delivery receipt/Aadhar Card/Bank Pass Book /Quarter Allotment order copy (if residing in govt. allotted quarter) etc. in which the address is mentioned (This should be in the name of either of the parents). If residing in Rented House Rent agreement along with electricity bill of the house owner.
- Self-declaration about Submission of documents, the distance of the residence from KV JAGATSINGHPUR & Undertaking for Caste Certificate – where applicable (The format may be downloaded from the Vidyalaya Website).
- 7. Certificate of Proof of Blood Group
- 8. Valid SC/ST/OBC-NCL Certificate issued by the competent authority (Certificate in the name of either of the parents may be accepted initially) If it is in the name of the parent an undertaking should be submitted to submit the certificate in the name of the child within 03 months from the date of admission.
- OBC (Non-Creamy Layer) Certificate issued by the competent authority should not be older than three years.It should be issued on or after 01.04.2022
- 10. Those claiming **Economically Weaker Section** should submit valid documents i.e. Valid

INCOME& ASSET CERTIFICATE TO BE PRODUCED BY ECONOMICALLY WEAKER SECTION" issued by the competent authority (Income Certificate will not be accepted in lieu of this) : It should be issued during the current Financial Year i.e. on or after 01.04.2025, Certificate issued after 01.04.2024 will be accepted initially, however the fresh one issued after 01.04.2025 will be submitted by the parent within One month of admission. (Certificate in the name of either of the parents may be accepted initially) – If it is in the name of the parent an undertaking should be submitted to submit the certificate in the name of the child within 03 months from the date of admission.

11. Those claiming **Below Poverty Line** should submit the following documents:

(a) BPL Card, if available in the name of the parent of the child, but lapsed as on date, this can be countersigned by the BDO of the locality of rural areas/Executive Officer of NAC of Municipality areas to validate the card along with Low Income Certificate/ EWS Certificate/Labour Card

OR

(b) PHH Ration Card (New) + Low Income Certificate/ EWS Certificate/Labour Card

OR

(c) Antodaya Anna Yojana Card + Low Income Certificate/ EWS Certificate/MGNREGP Job Card/Labour Card

AND

An Affidavit to the effect that as on date the Parent and his family belongs to BPL Category and Low-Income Group and all information provided about the above documents are correct.

- Valid Handicapped Certificate issued by the competent authority certifying that she/he is a child with Special Needs (CwSN) – those claiming CwSN.
- 13. A Service Certificate (By Government Employees) showing the number of transfers during the preceding 7 years issued by the competent authority- **ORIGINAL**(Those claiming Service Category 1/2/3/4) Format may be downloaded from the Vidyalaya Website
- Certificate from the employer showing the Pay particulars of the employee, the status of employment and nature of the establishment - ORIGINAL(Applicable only for Government employees – Those claimed Service Category: 1/2/3/4) – should be in the prescribed format available in Vidyalaya website
- 15. For government employees ID card issued by the employee/last month's pay slip
- 16. For Ex-Service Man Bonafide Certificate &Transfer details counter signed by the Zilla/Rajya Sainik Board or any competent authority, Copy of Discharge Book, Copy of PPO. (Copy of Discharge Book and Ex-Serviceman ID Card may be accepted).
- 17. Copy of Transfer Orders
- 18. Aadhar Card (Child, Father, Mother)
- Any other documents as required by the admission committee as per the demand of the situation NOTE:
 - a. The documents from Sl. No. 1 to 7 are compulsory for all and Sl.No. 8 to 19 are for the cases where applicable.
 - b. Different Formats are available in School Website under the head "ADMISSION FORMATS" in Pdf

- may be downloaded for use.

PRINCIPAL

CHECK LIST OF DOCUMENTS

PART-A (Details of the Child)

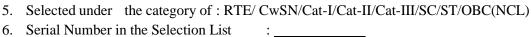
- 1. Name of the Child
- 2. Class to which admission sought
- 3. Session

: I (Class One)

: 2025-26

:_____

4. Application Submission Code



:

6. Serial Number in the Selection List

PART-B (Documents submission by the parent)

The self-attested copy (Except cases where original is mentioned) of the following documents are submitted by me.

| Sl. No. | Name of the Document | Yes/ No | Remarks |
|------------|--|------------|---------|
| 1 | Filled in Application Form for Admission (Page: 1 & 2 to be printed on both sides of a single paper) | | |
| 2 | Filled in Format for Entry in UBI Portal | | |
| 3 | Hard Copy (Print out) of the Online Application Form | | |
| 4 | Birth Certificate (Both Original & a Photocopy) | | |
| 5 | Residence Proof (Mention the type in Remark column) | | |
| 6 | Self-Declaration of submission of correct information and documents, Distance from School to Residence | | |
| 7 | Certificate of Proof of Blood Group | | |
| 8 | Caste Certificate (SC/ST/OBC-NCL) – (Specify whether in the name of the child or parent in Remarks Column | | |
| 9 | Undertaking (If Caste Certificate in the name of the Parent) | | |
| 10 | Income & Asset Certificate for Claiming Economically Weaker Sections | | |
| 11 | BPL Card/ Proof of claiming BPL (Write Names of documents in Remark Column) | | |
| 12 | CwSN Certificate (Specify % of disability and type of disability in Remarks Column) | | |
| 13 | Service Certificate & Certificate showing no. of transfers (ORIGINAL) (Specify category of employee i.e. state govt./central govt. etc. in Remarks Column) | | |
| 14 | Certificate from the employer – in prescribed format available in Vidyalaya Website (ORIGINAL) | | |
| 15 | Employee ID card/Last month's pay slip (Specify Employee Code in Remarks Column) | | |
| 16 | Transfer Orders (Specify number of transfers in preceding 7 years as on 31.03.2025 in the remarks column) | | |
| 17 | For Ex-Service Man ID proof/Discharge Book (Specify the date of discharge in Remarks Column) | | |
| 18 | For Ex-Service Man Certificate of transfers counter signed by the Authority (ORIGINAL) - (Specify no. of transfers in Remarks Column) | | |
| 19 | Aadhar Card (Child, Father, Mother) | | |
| 20 | Any Other | | |

Signature of the Parent with Date

PART-C (For the Verifying Officers)

All the documents mentioned above are submitted by the parent and verified by us from the original and found with the following Remarks. (Specify whether admission is approved or rejected in Remarks Column) Verifying Officer -1 Verifying Officer-2

Remarks:

Signature: Name & design. :

PM SHRI KENDRIYA VIDYALAYA JAGATSINGHPUR STUDENT INFORMATION FOR ENTRY IN UBI PORTAL

| Year of Admission in this KV | 2025 |
|--|------|
| Admission No. | |
| Student Name | |
| Father/Guardian Name | |
| Mother Name | |
| New Admission | Yes |
| Class | |
| Section | |
| Admission Category (I/II/III/IV/V) | |
| Date of Birth (DD/MM/YYYY) | |
| Gender (Boy/Girl/Third Gender) | |
| Physically Disabled (Yes/No) | |
| Category (General/SC/ST/OBC-NCL) | |
| Minority | |
| BPL (Yes/No) | |
| Mobile Number | |
| Email | |
| Blood Group | |
| Aadhar No. | |
| Account No. | |
| Account label | |
| IFSC Code | |
| Select for Payment: Q1(Apr-Jun)/ Q2(Jul-Sep)/Q3(Oct-Dec)/Q4(Jan-Mar) | |
| Eligible for Reimbursement (Yes/No) | |
| Admission Under RTE (Yes/No) | |
| Exemption under Sibling (Yes/No) | |
| Single Girl Child (Yes/No) | |
| KVS Employees Children (Yes/No) | |
| Emergency Assistance (Yes/No) | |
| Court Case (Yes/No) | |
| Exemption under Article 123-124 (NA/Full) | |
| Children of Armed/Para Forces whose parents killed/disabled during hostilities, operation Meghdoot and Vijay (Yes/No) | |
| Children of Armed/Para Forces whose parents killed/declared missing or disabled during any counter insurgency operations in India or Abroad (Yes/No) | |
| PM CARE (Yes/No) | |
| Unique Students ID (To be entered by the Class Teacher after entry) | |

Signature:

<u>SELF DECLARATION</u> (Submission of Documents & Information)

| I | | ageyears | Father /Mo | ther |
|----|-------------|----------|------------|------|
| of | Master/Miss | , | resident | of |

(Complete Address), do hereby declare that the information given in admission form of the admission in PM SHRI Kendriya Vidyalaya Jagatsinghpur 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 has to be deemed cancelled and I will be liable to punishment as per guidelines of KVS and the benefit accrued by me or my ward will be summarily cancelled.

| Date | : | | Signatur | e of the Parent |
|-------|---|---|-------------|-----------------|
| Place | : | _ | Mobile No : | |

<u>SELF DECLARATION</u> (Distance from School to Residence) – For Candidates Selected under RTE

| Ι | ageyears, Father /Mother |
|--|---|
| | , bearing Application |
| Submission Code : | Residence address |
| as mentioned in the Registration Form | |
| | Complete Address as mentioned in the Opline |
| | Complete Address as mentioned in the Online |
| Jagatsinghpur and the above mentioned resid | at the distance between Kendriya Vidyalaya ence iskm. |
| | |
| Date : | Signature of the Parent |
| Place : | Mobile No : |
| | ERTAKING |
| | /OBC/BPL/EWS Certificate) |
| Ι | (Name of the Parent) do hereby |
| declare that I will submit the SC/ST/OBC- N | on-Creamy Layer/BPL/EWS issued by the |
| competent authority in the name of my child | (Name |
| of the Child) within 03 (Three) months from | the date of admission of my ward in Kendriya |
| Vidyalaya Jagatsinghpur. If I fail to submit the | he same in the name of my child within this period |
| the admission of my ward will be summarily | cancelled. |
| | |
| Date : | Signature of the Parent |

Mobile No

:

Place : _____

SERVICE CERTIFICATE (CENTRAL GOVERNMENT)

| Certified that Sri/Smt. | is v | working a | s a |
|---|--------|------------|-----|
| regular/permanent/temporary/contractual/part time/casual employee in | the | capacity | of |
| in this office/Ministry/under t | the I | Ministry | of |
| government of India. He/ She is | s an | employee | of |
| Defence Service/CRPF/BSF/NSG/SPG/CISF/Central Govt./Central Go | ovt. | Autonomo | ous |
| body/Central govt. PSU fully financed/partially financed by the Central Govt. I | His/he | r services | are |
| non-transferable / transferable anywhere in India. | | | |
| Complete Address and telephone No. of the Office (in Block Letters) | | | |
| | | | |

| Place: | |
|--------|--|
| Date: | |

Signature of Head of the Office (with Name, Designation and Office Stamp)

CERTIFICATE OF NUMBER OF TRANSFERS

| Ι | | | | | | | (| Name | e) | | | | | |
|----------|-----------|--------|--------|---------|------|-----|-------|-------|----------|-----------------|-----|-----------|-----------|------------------|
| (rank /c | lesignati | ion) o | f | | | | | | | | [] | Name | of the | Office), do |
| hereby | certify | that | during | the | past | 7 | years | (Up | to | 31.03.2025) | I | have | been | transferred |
| | | | 4 | (T.a.) | C | ~ (| | (alan | 6 | - and station (| 4.0 | a a 41a . | ··· /Tf . | In a distance of |

times (In figures & in words) from one station to another. (*If the distance between the form and to place is at least 20 kms and the minimum period of stay is six months then only it will be considered as a transfer*). The details of which are given as under: I know that if the above-mentioned facts are found incorrect, my child will be disqualified for admission in Kendriya Vidyalaya.

| Office/Unit and Place | Date of Joining the Office/ Unit | Date of Release from the Office/Unit | Period of stay (in days) | Transferred Office/Unit and Place | Distance between the Two Office (in km) | Transfer Order No. |
|--------------------------|---|---|-----------------------------------|--------------------------------------|---|-----------------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Signature of the Parent

COUNTER SIGNATURE

Ι,___

(Name)

____(Rank/Designation) of

(Name of the Office/Unit/Department) hereby certify that the particulars given in above have been authenticated by the records held in the office and found correct.

| Place: | |
|--------|--|
| Date: | |

Signature of Head of the Office (with Name, Designation and Office Stamp)

SERVICE CERTIFICATE (STATE GOVERNMENT)

| Certified that Sri/Smt. | | is working as a |
|---|-------------------------------|------------------------------|
| regular/permanent/temporary/contra | ctual/part time/casual employ | yee in the capacity of |
| | in this office /Ministry | /under the Ministry of |
| | government of | He/ She |
| is an employee of State Govt. / State | e Govt. Autonomous body/State | Govt. PSU fully financed by |
| the State Govt./partially financed transferable anywhere in | • | vices are non-transferable / |
| Complete Address and telephone N | | <u>s)</u> |
| | | |
| Place | Signature of Her | ad of the Office |

Date: _____

Signature of Head of the Office (with Name, Designation and Office Stamp)

CERTIFICATE OF NUMBER OF TRANSFERS

I ______ (Name) ______ (Name of the Office), do hereby certify that during the past 7 years (Up to 31.03.2025) I have been transferred times (In figures & in words) from one station to another. (If the distance

between the form and to place is at least 20 kms and the minimum period of stay is six months then only it will be considered as a transfer). The details of which are given as under:

| Office/Unit and Place | Date of Joining the Office/ Unit | Date of Release from the Office/Unit | Period of stay(in days) | Transferred Office/Unit and Place | Distance between the Two Office (in km) | Transfer Order No. |
|--------------------------|---|---|----------------------------------|--------------------------------------|---|-----------------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

I know that if the above mentioned facts are found incorrect, my child will be disqualified for admission in Kendriya Vidyalaya.

Signature of the Parent

I, ______(Name) ______(Rank/Designation) of ______(Name of the Office/Unit/Department) hereby certify that the particulars given in above have been authenticated by the records held in the office and found correct.

| Place: | |
|--------|--|
| Date: | |

Signature of Head of the Office (with Name, Designation and Office Stamp)

CERTIFICATE FROM THE EMPLOYER (Regarding Status of Funloyment & identification of Admission Category in KVS)

| mpio | <u>ymeni</u> | <u>x menn</u> | Jicai | <u>ion o</u> j | Aun | aissio | <u>n Cale</u> | <u>gory i</u> | <u>n rvs)</u> | |
|------|--------------|---------------|------------------------------------|---|---|---|--|---|---|--|
| | - | | - | - | (1 | Name | of | the | Employer) | , |
| | | | W | orking | 5 | in | the | | office | of |
| | | depart | ment | of | | | | , | governmen | t of |
| do | hereby | certify | the | follo | wing | in | respect | of | Sri/Smt./ | Ms. |
| | | (Nat | me | of | the | Emplo | oyee) | whose | son/daug | ghter |
| | | (Na | me of | f the C | Child) | is see | king adı | missior | n in PM SH | IRI |
| | | | depart do hereby certify (Na | w department do hereby certify the (Name | working department of do hereby certify the follo (Name of | (1 working department of do hereby certify the following (Name of the | (Name working in department of do hereby certify the following in (Name of the Emplo | (Name of working in the department of do hereby certify the following in respect (Name of the Employee) | (Name of the working in the department of, do hereby certify the following in respect of (Name of the Employee) whose | working in the office department of, governmen do hereby certify the following in respect of Sri/Smt./ |

Kendriya Vidyalaya Jagatsinghpur.

| 01 | Name of the Child for whom admission is sought (in Block Letters) | |
|----|---|-----------------|
| 02 | Class in which admission is sought | |
| 03 | Full name of the employee (in Block Letters) | |
| 04 | Designation of the employee | |
| 05 | Employee Code / Employee Identity No. | |
| 06 | Name of the office where the employee is presently posted | |
| 07 | Status of Employment (Whether Permanent/ Regular/ Temporary/Contractual/ | |
| | Part Time/ Adhoc/Daily Wage Basis/Casual -To be written clearly) This office/organization is Central Government / <i>Central Government</i> | |
| | Autonomous body/PSU fully or partially financed by Govt. of India/State | |
| 08 | Government/ Sate Government Autonomous Body/ PSU fully or partially | |
| | finance by the state govt. (To be written clearly) | |
| - | Whether the employee is to be considered as an employee of Central | |
| | Government/ <i>Central Government Autonomous body</i> /PSU fully or partially | |
| | financed by Govt. of India/State Government/ Sate Government Autonomous | |
| | Body/ PSU fully or partially finance by the state govt. (Any one of the above to be | |
| 09 | written clearly) | |
| 09 | Note: STATE GOVERNMENT EMPLOYEE: An employee who is regular (i.e. | |
| | | |
| | an employee working on that post sanctioned by the State Government in | |
| | substantive capacity) and draws his emoluments from the Consolidated Fund of State. | |
| | | |
| | Please write any one of the following which is applicable i.r.o. the child for | |
| | whom admission is sought | |
| | Children of transferable and non-transferable Central government employees and children of ex- servicemen. | |
| | 2. Children of transferable and non-transferable employees of | |
| 10 | Autonomous Bodies / Public Sector Undertaking/Institute of Higher Learning of the Government of India. | |
| 10 | 3. Children of transferable and non-transferable State Government | |
| | employees. | |
| | 4. Children of transferable and non-transferable employees of | |
| | Autonomous Bodies/ Public Sector Undertakings/Institute of Higher Learning of the State Governments. | |
| | 5. Children from any other category i.e. , all those not covered under any | |
| - | of the categories 1 to 4 listed above. | |
| | | (i) Pay Level : |
| | | (ii) Pay: |
| 11 | | (iii) DA : |
| 11 | Recent Pay/Salary of the Employee with proper Split up | (iv) HRA: |
| | | (v) Any Other |
| | | (vi) Any Other: |
| | | (vii) Total : |
| 12 | Whether the employee is drawing the consolidated pay | YES / NO |

Pge-1/2 AFFIDAVIT FOR SINGLE GIRL CHILD

Rs. 100/- Stamp Paper

(Judicial Magistrate/SDM/Executive Magistrate (Not below the rank of Tahasildar)

| × × | 0 | | 8 | | | , |
|---------------|---------------|----------------------|---|---------------|----------|-----------|
| Ι | | | aged | y | /ears , | Indian |
| inhabitant | occup | ation _ | | Resi | dent | of |
| | | | | | | is |
| mother/father | r of | | | Date | of | Birth |
| | | submitt | ing my undertaking to the Head | of the I | nstituti | on for |
| admission | of my | daughter | | | | in |
| Class | c | le KVS Adm | ission Guidelines 2025-26 | | | |
| 1. I here | eby declare | e that Miss | | | is tl | he only |
| girl c | hild in my | family (with | no male/female sibling). I understan | ıd that it sh | all be 1 | ny sole |
| respo | onsibility to | o inform you | about any change in status of Single | Girl Child | in the | family |
| imme | ediately, if | and when it o | occurs. | | | |
| 2. I am a | also aware | that in case in | t is detected at any time that the affida | avit sworn l | by me | is false, |
| appro | opriate acti | on will be tal | ken by the school authorities and KV | 'S against n | ne. | |
| Signa | ature of Fa | ther | Signa | ature of Mo | other | |
| <u>Resid</u> | lential Add | <u>lress with Co</u> | ontact Number: | | | |
| | | Solemnly : | affirmed at: | | | |
| | This_ | | (Day) of(Month) | of 2025 (Y | 'ear) | |
| | | | BEFORE ME | | | |
| Expla | ained and I | Identified by | me, | | | |
| | | | | | | |

Advocate

| | | | | | Pge-2/2 | | | |
|--------|---|------------------------------------|-------------------|----------------------|--------------------|--|--|--|
| I, | AFFIDAVIT Father | $\operatorname{FOR}_{\mathrm{of}}$ | SINGLE (Single | GIRL CH | HILD Child) | | | |
| | | | | &Mother | of (Single Girl | | | |
| Child) | | | | | _ residing at | | | |
| do | solemnly declare | that w | e have | no other | child except | | | |
| | | | _(Name of the S | Single Girl Child). | | | | |
| 1. | That I am citizen of India. | | | | | | | |
| 2. | That | | | | is my real | | | |
| | daughter. | | | | | | | |
| 3. | That her date of birth is | | | | | | | |
| 4. | . That I have a Single Daughter and no other child in my family. | | | | | | | |
| 5. | | | | | | | | |
| 6. | . That I will inform the School authority in case another son or daughter is born in my family. | | | | | | | |
| 7. | If any information or docu | uments are f | ound incorrect | on verification, the | e admission of my | | | |
| | ward may be treated as c | cancelled, I | will not sustair | n any claim again | st the decision of | | | |
| | Principal, PM SHRI Kend | riya Vidyala | aya Jagatsinghp | ur. | | | | |
| Place: | | | | | | | | |

Date:

Signature of Father

Signature of Mother

Deponent