केन्द्रीय विद्यालय एमसीएल, जगन्नाथ क्षेत्र

डाक : तालचेर, जिला-अनुगुल, ओडिशा-७५९१०३

के वि कोड: 2441

वेबसाइट : https://mcljagannath.kvs.ac.in

इ मेल :- kvmcljagannath@gmail.com



KENDRIYA VIDYALAYA MCL, JAGANNATH AREA PO: Talcher, Dist.: Angul, Odisha-759103

KV Code: 2441

Website: https://mcljagannath.kvs.ac.in

Email: kvmcljagannath.ggmail.com

NOTICE

It is hereby informed to all the parents of the candidates who are provisionally selected for admission into class I in this KV that the admission will be done as per the selection list published on the website of the Vidyalaya on dated 25/03/2025.

Therefore, concerned parents are hereby requested to report to the Vidyalaya from 26/03/2025 to 02/04/2025 within the dates mentioned above (between 8:00 AM to 10:30 AM) along with the relevant documents appended herein.

PRINCIPAL

DOCUMENTS:

KENDRIYA VIDYALAYA MCL JAGANNATH AREA <u>DOCUMENTS REQUIRED FOR ADMISSION IN CLASS-I,</u> <u>SESSION 2025-26</u>

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 the vidyalaya website for download and use.
- 3. Hard copy (print out) of the online application form- Paste the colour passport size photo of the child on it.
- 4.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.
- 6. Certificate of Proof of Blood Group of child.
- 7. Valid SC/ST/OBC-NCL Certificate of child issued by the competent authority. (Certificate in the name of either of the parents will be accepted initially if it is not available for the child.).

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.

- 8.OBC (Non-Creamy Layer) Certificate issued by the competent authority should not be older than three years.
- 9. Those claiming Below Poverty Line should submit the following documents:
- 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

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

OR

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.

10. For EWS Eligibility Criteria

Income: The family's gross annual income should be below Rs. 8.00 lakh (Rupees eight lakh only).

Asset Ownership: Individuals whose families own or possess certain assets are excluded from being identified as EWS,regardless of their income. These include:

5 acres or more of agricultural land / A residential flat of 1000 sq. ft. or more / A residential plot of 100 sq. yards or more

in notified municipalities / A residential plot of 200 sq. yards or more in areas other than notified municipalities

Certificate Issuance: The Income and Asset Certificate for EWS is issued by the Tahasildar / Additional Tahasildar in the format given.

Validity: The certificate is valid for one year from the date of issue.

Recent EWS & Income & Asset Certificate in the name of the parent and the child (to be produced by Economically Weaker Section) and Income Certificate of the parent will be accepted but only the low-income certificate cannot be accepted.

- 11. Valid Handicapped Certificate issued by the competent authority certifying that she/he is a child with Special Needs (CwSN) those claiming CwSN.
- 12.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 1/2/3/4/5) – Format may be downloaded from the Vidyalaya Website

- 13. 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: 1/2/3/4/5) should be in the prescribed format available in Vidyalaya website.
- 14.For government employees ID card issued by the employee/last month's pay slip
- 15.For Ex-Service Man Bonafide Certificate &Transfer details counter signed by the Zilla/RajyaSainik Board or any competent authority, Copy of Discharge Book, Copy of PPO. (Copy of Discharge Book and Ex-Serviceman ID Card may be accepted).
- 16. Copy of Transfer Orders
- 17. Aadhar Card (Child, Father, Mother)
- 18. Transfer certificate (T.C) of child with PEN No. and APAAR ID
- 19. One passport size photo of the child.
- 20. Photocopy of front page of Service Book (For service category I,II,III,IV,V)
- 21. Any other documents as required by the admission committee as per the demand of the situation.

PRINCIPAL



केन्द्रीय विद्यालय एम सी एल जगन्नाथ क्षेत्र KENDRIYA VIDYALAYA MCL JAGANNATH AREA प्रवेश के लिए प्रार्थना पत्र /APPLICATION FOR ADMISSION

प्रवेश संख्या / Admission No.	, प्रवेश की तिथि/ DateAdmission:	

Office Use Only										
Fresh/ KV TC / Other TC	Class	Secti on	Admission Category	Social Cat.	Boy/ Girl	Parent's Deptt/ Occupation	Admission Guidelines Provision/ Para	Authority Letter No.		

To be filled by the Parent विशेषताएँ/Particulars SL. NO जानकारी / Information विदयार्थी का नाम/Name of the Student 1 जन्म तिथि/Date of Birth 2 आय् 31.03.2025 को/Age (As on 31.03.2025) Year Month Days 3 4 राष्ट्रीयता/Nationality 5 माता - पिता का ब्योरा /Details of Parent माता का नाम/Mother's Name पिता का नाम/Father's Name ii माता का व्यवसाय (पद नाम)/Mother's Occupation (with designation) iii पिता का व्यवसाय (पद नाम)/ Father's Occupation (with designation) iv कार्यालय का नाम , पूरा पता व दूरभाष संख्या/Name of Office and Full Address with Telephone Number (Father/Mother) पूर्ण आवासीय पता व दूरभाष संख्या/Full Residential Address with Telephone Number vi स्थायी घर का पता / Permanent House Address vii BasicPay:Rs. _____ Total EmolumentsRs. ___ वेतन 01.04.2025 को Pay as on 01.04.2025 viii 31.03.2025 तक पिछले 7 वर्षों में हुए स्थानान्तरणों की संख्या /Number of transfers ix during last 7 years as on 31.03.2025 प्रवेश की श्रेणी (माता - पिता)/Admission Category of Parent(I/II/III/IV/V) स्थानीय अभिभावक का पता (यदि उपयोग)/Name & Address of Local Guardian (if any 6 अंतिम विद्यालय जहाँ पढ़ा हो/Name and address of the school last attended with class 7 क्या यह केन्द्रीय विद्यालय था या मान्यता प्राप्त/अमान्यता प्राप्त विद्यालय था 8 /Whether it was Kendriya Vidyalaya/Recognized/Unrecognized School विगत परीक्षा परिणाम /Result of Last Examination & Percentage of Marks 9 जिस कक्षा में प्रवेश चाहिए/Class to which admission is sought 10 लिये जाने वाले प्रस्तावित विषय /Subject proposed to offer 11 क्या स्थानान्तरण प्रमाण पत्र संलग्न हैं (हां/नहीं) / Whether the transfer 12 certificate is attached (Yes/No) स्थानान्तरण प्रमाण पत्र की संख्या वो तिथि / No. & Date of transfer 13 certificate Mother tongue: ____ , Home Town: 14 मात् भाषा व गृह नगर/Mother tongue & Home Town क्या विद्यार्थी अन्सूचित जाति /जनजाति/ओ.वी.सी./सामान्य से हें / Whether 15 the student belongs to Schedule Caste/Schedule Tribe/OBC/General

Signature of the Parent:

माता-पिता के द्वारा घोषणा / DECLARATION BY THE PARENT

में एतदद्वारा घोषणा करता / करती हूँ कि मेरे द्वारा दी गई समस्त सूचना सत्य है। मै विद्यालय नियमों से प्रतिबद्ध रहूँगा/रहूँगी। I hereby declare that the information furnished by me are correct to the best of my knowledge. I shall abide by the rules of the Vidyalaya.

दिनांक/D	Oate:	माता-पिता के हस्ताक्षर/Signature of Parents				
	केवल कार्यालय के	<u> प्रयोग के लिए</u>	/FOR THE OI	FFICE USE ONLY		
प्रमाणित	किया जाता हैं कि मैंने आवेदन -	पत्र और सम्बद्ध	कागजातों की जांच	कर ली है। Certified that I have checked the		
	on form and the relevant papers are	-				
				Admission In charge		
		_		में प्रवेश दें Please admit after checking the relevant papers and		
finalise t	he dues.					
दिनांक/D	Date :	_		प्राचार्य /PRINCIPAL		
दाखिला	दिया गया । Admitted to Class :	Secti	on:			
प्राप्त धन	न का विवरण । Details of Fees rece	eived:				
श्ल्क रस	नीद क्र. Fee Receipt No	f	तेथि । Date :			
-	थि /Admission Fee : Rs					
	ा. शुल्क /VVN Fund : Rs					
_	_			ल्क / TOTAL : Rs कक्षा		
उपास्यात	ो पंजिका में नाम दर्ज किया गया /]	ivame nas been ente	ered in the Class Au	tendance Register.		
दिनांक/D	Oate :		क	क्षा अध्यापक/ Class Teacher		
प्रमाणित	किया जाता हें कि समस्त प्रविष्टिर	याँ छात्र पंजिका में	दर्ज की गयी एवं १	थुल्क का भुगतान इस कार्यालय कक्षा अध्यापक		
				the Scholar's Register and the dues have been		
	by Office/Class Teacher.					
विद्यार्थी	की छात्र पंजिका संख्या / The S.R.	No. of the student i	s	Vol. :		
दिनांक/D	Oate:		कार्यालय प्र	भारी /Office In-charge		
		फ़ाइल	T/FILE			
दिनांक/D	Date:			प्राचार्य/PRINCIPAL		
		CHECK LIST (OF DOCUMENTS	<u>1</u>		
	/KV/ARMY TC:					
Sl.No.	Oocuments with No. & Date of Issue		Data of Issue	Damarka		
SI.INO.	Name of the Document	Number	Date of Issue	Remarks		
			+			

KENDRIYA VIDYALAYA MCL JAGANNATH AREA STUDENT INFORMATION FOR ENTRY IN UBI PORTAL

Year of Admission in this KV	2025
Admission No.	00
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)	No
Court Case (Yes/No)	No
Exemption under Article 123-124 (NA/Full)	NA
Children of Armed/Para Forces whose parents killed/disabled during hostilities, operation Meghdoot and Vijay	No
Children of Armed/Para Forces whose parents killed/declared missing or disabled during any counter insurgency operations in India or Abroad	No
Unique Students ID (To be entered by the Class Teacher after entry)	

Signature:

1. Parent 2. I/c Admission 3. Class Teacher

SELF DECLARATION (Submission of Documents & Information)

I		Father /Moth	ner of Master/Miss
	age	years	, resident of
		` •	olete Address) , do
Jagannath Area and in the enclose has been concealed therein. I am not true at any point of time, adm	on given in admission form of the act sed documents is true to the best of a well aware of the fact that if the inferior instance has to be deemed cancelled and t accrued by me or my ward will be s	my knowledge a ormation given b d I will be liable	and belief and nothing by me is proved false, to punishment as per
Date :	Signature o	of the Parent	
Place:		:	
(Distance from Scho	SELF DECLARATION ol to Residence) – For Candida	ates Selected	under RTE
Ι	Father /N	Iother of Master/	/Miss
	ageyears		
	Resid		
Registration Form			
· ·	Complete Address as mentioned in the etween Kendriya Vidyalaya MCL Jaş	•	, · · ·
mentioned residence is			
Date :	Signature o	of the Parent	
Place:	Mobile No : _		
	<u>UNDERTAKING</u>		
(Submis	ssion of SC/ST/OBC/BPL/EWS	Certificate)	
I	(Name of	the Parent) do he	ereby declare that I
will submit the SC/ST/OBC- Nor	n-Creamy Layer/BPL/EWS issued by	the competent at	uthority in the name
	(Name of the		
the date of admission of my ward	in Kendriya Vidyalaya MCL Jagann	ath Area. If I fail	to submit the same
in the name of my child within th	is period the admission of my ward w	vill be summarily	cancelled.
Date :	Signature o	of the Parent	
Place :	<u> </u>	:	
11400		•	

SERVICE CERTIFICATE (CENTRAL GOVERNMENT)

Certified that	Sri/Smt.				is	working as a
		j	in this	nt of India. He/ She	ler the is an empl	
financed/partial anywhere in Ind	ly financed lia.	by the Centra	al Govt.	entral Govt. Autonomous His/her services are n		
Complete Addre	ess and teleph	ione No. of the	<u>Office</u>			
Place:				signature of Head of the ome, Designation and Office		
			(, , , , , , , , , , , , , , , , , , , ,	Ι,	
_			(3.T	MBER OF TRANSFE	<u>RS</u>	, .
/designation) of			(Na	me) (Name of the	Office) do	(rank
	vears (Up to	31.03.2025) I	have bee	n transferred	f Office), uo	imes (In figures &
in words) from	one station to	another. (If th	e distance	e between the form and	to place is a	t least 20 kms and
_		is six months	s then on	ly it will be considered	as a transfe	(er). The details of
which are given		tioned foots and	foundin	annant may abild will be	diagnalified	for admission in
Kendriya Vidya		noned facts are	iouna m	correct, my child will be	uisquaiiiieu	101 adillission ili
Office/Unit and	Date of Joining the	Date of Release from	Period of stay	Transferred Office/Unit	Distance between the Two	Transfer Order
Place	Office/Unit	the Office/Unit	(in days)	and Place	Office (in km)	No.
					KIII)	
				_	of the Parent	
T				<u>SIGNATURE</u>	1/D	\ C
1,		(Name)	of the Of	(Ran fice/Unit/Department) he	ik/Designatio	ON) OI that the
particulars given	n in above hav			the records held in the o		
D.			=-		0.00	
Place: Date:				fignature of Head of the ome, Designation and Officers		
Daw			(will ING	mic, Designation and Off	nee stamp)	

SERVICE CERTIFICATE (STATE GOVERNMENT)

Certified that	Sri/Smt.						is working as a
regular/permane	ent/temporary	in	this	office	/Ministry	in tl /under	he capacity of the Ministry of He/ She is an
		State Govt. A	utonomoi	is body/	State Govt. PS	SU fully fi	inanced by the State asferable anywhere in
Complete Addre	ess and teleph	hone No. of the	<u>Office</u>				
Place: Date:				_	of Head of the signation and O		p)
	<u>(</u>	CERTIFICAT			OF TRANSFI	ERS	
I				ıme) _			(rank
/designation) of					(Name of th	e Office), o	do hereby certify that
during the past	7 years (Up to	o 31.03.2025) I	have bee	en transfe	erred		_ times (In figures &
							s at least 20 kms and
_		is six months	then on	ıly it wil	l be considere	d as a tran	<i>nsfer</i>). The details of
which are given	as under:	,		1		T .	
Office/Unit and Place	Date of Joining the Office/Unit	Date of Release from the Office/Unit	Period of stay(in days)		rred Office/Unit and Place	Distance between the Two Office (in km)	Transfer Order No.
I know that if the Kendriya Vidya		tioned facts are	found in	correct, r	•	-	ed for admission in
		00	TINIME	CICATA	_	of the Pare	ent
т.		<u>CO</u>	UNTER	SIGNA	TURE (D	1.75	·
I,		(Name) _	6.4 00	CC: /T.T.:	(Rai	nk/Designa	ition) of
particulars given		(Name ve been authen					
DI			,	7.	CII 1 C	O.C.	
Place:				_	of Head of the		
Date:			(with Na	ame, Des	signation and O	IIIce Stamp))

CERTIFICATE FROM THE EMPLOYER

(Regarding Status of Employment & identification of Admission Category in KVS)

of of Ms.

I	Sri/Smt./Ms.		(Na	me	of	the	Employer)	
desig	gnation work	ing	i	n	the		office	o
	department of					,	government	O
	do hereby certify the	follo	wing	in	respect	of	Sri/Smt./	Ms
	(Name o		the		oloyee)	whose		
	(Name of the C			-	•			_
Lagar	nnath Area	iiiid) i	3 SCCKII	ig aui	111331011 111	renarry	a viayalaya	IVICI
		$\overline{}$						
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/geographics in Control Covernment/Covered Covernment	\perp						
	This office/organization is Central Government/Central Government 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	i						
	Government/Central Government Autonomous body/PSU fully or partially							
	financed by Govt. of India/State Government/ Sate Government Autonomous							
0.0	Body/ PSU fully or partially finance by the state govt. (Any one of the above to)						
09	be written clearly)							
	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							
	1. Children of transferable and non-transferable Central governmen	t						
	employees and children of ex- servicemen.							
	2. Children of transferable and non-transferable employees of							
	Autonomous Bodies / Public Sector Undertaking/Institute of Higher							
10	Learning of the Government of India.							
	Children of transferable and non-transferable State Government amployees	i						
	employees. 4. Children of transferable and non-transferable employees of	f						
	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	r						
	any of the categories 1 to 4 listed above.							
	1	+	(i)	Pay	Level:			
			(ii)	Pay	:			
			(iii)	DA				
			(iv)	HRA	\ :		_	
11	Recent Pay/Salary of the Employee with proper Split up		(v)		Other			
			(vi)		Other :			
			(vii)	Tota	1:			
	<u> </u>	+						
12	Whether the employee is drawing the consolidated pay				Y	ES / NO		
								_

Place: _ Date: __

Signature of the Certifying Authority with Seal

	CHECK LIST OF DOCUMENTS		
PAR	T-A (Details of the Child)		
1	. Name of the Child :		
2	E		
3			
	. Application Submission Code :		
	 Selected under the category of : RTE/ CwSN/Cat-I/Cat-II/SC/ST/OBC Serial Number in the Selection List : 	L(NCL)	
	T-B (Documents submission by the parent)		
	self-attested copy (Except cases where original is mentioned) of the following	ing documen	ts 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 31.03.2022 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		
All tł	PART-C (For the Verifying Officers) ne documents mentioned above are submitted by the parent and verified by	<u>)</u>	e of the Parent with Date
	allowing Remarks (Specify whether admission is approved or rejected in Remark		

Al

	Verifying Officer -1	Verifying Officer-2
Remarks:		
Signature:		
Name & design.:	I/C Admission	Counter Signed by the Principal