## ପିଏମ୍ ଶ୍ରୀ କେନ୍ଦ୍ରୀୟ ବିଦ୍ୟାଳୟ ଭା.ନୌ.ପୋ. ଚିଲିକା पीएम श्री केन्द्रीय विद्यालय भा.नौ.पो. चिल्का

INS Chilka, At/Post office : Naval Base, Dist: Khordha (Odisha) -752037 (An Autonomous Body Under Ministry of Education, Government of India)

mhttps://inschilka.kvs.ac.in, kvchilkappl@gmail.com, 06756-257203

KV Code:1161, Station Code:101, CBSE School Code:19113, Affiliation No:1500011, UDISE:21170702703, Estd.:1981

Date: 30.04.2025

केन्द्रीय विद्यालय संगठन

### **NOTICE**

Reg: Vacancies and Registration for fresh admission for the session: 2025-26 under ST category. Tentative Vacancies for fresh admission for the session: 2025-26 under ST Category at PM SHRI Kendriya Vidyalaya INS Chilka are as follows.

Class	No. of vacancies (Tentative) for Fresh Admission for ST Category
IV	01
VI	01
VII	01

There are few tentative vacancies for **Schedule Tribe (ST) category** (as given in the above table) in Class- IV, VI and VII only for the session: 2025-26. Registration for fresh admissions, in Class-Class- IV, VI and VII (For ST candidates Only) will be started from 02.05.2025 (Friday) to 06.05.2025 (Tuesday) in **offline** mode only. The duly filled in Registration form along with required documents needs to be submitted to the office of the Principal from 02.05.2025 to 06.05.2025 (09:00 AM to 11:00 AM) on all working days.

#### **Mode of Registration**

The parents have to download the registration form and other formats attached with this notice. They have to take a print out of the Registration form and fill it. After filling this form, they have to submit the Registration form along with required documents mentioned below in the office between 02.05.2025 and 06.05 2025 (09:00 AM to 11:00 AM) (No other Mode of Application will be accepted).

#### **Eligible Age for Admission:**

The minimum and maximum age limit for admission in various classes is given below.

Class	Minimum/Maximum Age as on 31st March 2025 (Child				
	born on 1st April should also be considered).				
IV	9 years but less than 11 years of Age				
VI	10 years but less than 12 years of Age				
VII	11 years but less than 13 years of Age				

#### Following documents to be attached:

- 1. Filled in Registration form
- 2. Self-attested copy of the Date of Birth Certificate issued by the competent authority.
- 3. Bonafide certificate/TC from the school last attended (if applicable).
- 4. Service Certificate and Transfer details only for Government Employees (If applicable) in the attached format. Certificate from the Employer (In the attached format). Salary Slip of last Month.
- 5. Valid Caste Certificate (Schedule Tribe Certificate)
- 6. Aadhar Card of the Child and the Parents.
- 7. Local Residence proof (Should be in the name of either of the parents) In case of rented house Rent Agreement along with electricity bill of the owner.
- 8. Any other documents applicable.

For any query contact the Admission Helpdesk at:

- 1. Shri S C Jena, PGT (Commerce) & I/c Admission 9178024090
- 2. Shri B S Mandal, PRT & Member 9304174772

**PRINCIPAL** 

# SERVICE CERTIFICATE (CENTRAL GOVERNMENT)

Certified that						is working as a
			in th	me/casual employee iis office/Ministry/u	nder the	e Ministry of
financed/partial anywhere in Inc	BSF/NSG/SP lly financed dia.	G/CISF/Centra by the Cent	al Govt./C ral Govt.	ent of India. He/ She Central Govt. Autonomo . His/her services are (in Block Letters)	ous body/Cei	ntral govt. PSU fully
Place: Date:				Signature of Head of the lame, Designation and C		)
	<u>.</u>	CERTIFICAT	re of N	UMBER OF TRANSF	<u>ERS</u>	
/designation) of during the past in words) from the minimum p which are given	f	to 31.03.2025) to another. (If to y is six month	I have be he distan hs then o	ame) (Name of the considered and the considered and the considered will be considered and the co	to place is ded as a tran	lo hereby certify that _ times (In figures & at least 20 kms and esfer). The details of
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.
		C	 	Signatur <b>R SIGNATURE</b>	e of the Pare	ent
Ι ,			(Name)		,	nk/Designation) of
particulars give	n in above ha			ne Office/Unit/Departr y the records held in the		
Dlago				Ciamatan	o of Hood of	Etha Offica
Place: Date:				Signatur (with Name, De	e of Head of signation an	

#### SERVICE CERTIFICATE (STATE GOVERNMENT)

Certified that	Sri/Smt.						is	working	as a
regular/permane		<del>-</del> _	n this	office	employee /Ministry of	/under	the		y of
employee of S Govt./partially			Autonomo	ous body/	State Govt. F	SU fully	financ	ed by th	e State
Complete Addr	ess and telep	 hone No. of th	e Office	(In Block	Letters)				
Place: Date:			(with N	_	e of Head of th signation and (		mp)		
		CERTIFICAT	TE OF N	<u>UMBER</u>	OF TRANSF	ERS			
/designation) of during the past in words) from <i>the minimum p</i> which are given	f 7 years (Up to one station to period of state	to 31.03.2025) to another. ( <i>If t</i>	I have be	een transfo ce betwee	(Name of terred and the form and	d to place	tir • <i>is at i</i>	nes (In fig least 20 k	gures & ms and
Office/Unit and Place	Date of Joining the Office/ Unit	Date of Release from the Office/Unit	Period of stay(in days)		nsferred Init and Place	Distance between the Two Office (in km)		ansfer Ord No.	er
I know that if the Kendriya Vidya		tioned facts ar	e found in	ncorrect,	•	e disquali		or admissi	on in
I,particulars give		(Name) (Name	e of the C		TURE (Rat/Department)	nnk/Desigr hereby ce	nation) rtify th		
Place: Date:				7)	Signatur with Name, De	e of Head signation			up)

#### CERTIFICATE FROM THE EMPLOYER

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

I	Sri/Smt./Ms.	(	Name	of	the	Employer)	,
design	designation working			the		office	of
	department of				,	government	of
	· · · · · · · · · · · · · · · · · · ·	following	g in	respect	of	Sri/Smt./	Ms.
	(Name of	the	-	oloyee)	whos		_
	(Name of the Child	) is seekii	ng admis	sion in PM	SHRI	Kendriya Vidy	yalaya
	Chilka.						
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						
0,	Time/ Adhoc/Daily Wage Basis/Casual -To be written clearly)						
	This office/organization is <b>Central Government</b> /Central Government Autonomous						
08	body/PSU fully or partially financed by Govt. of India/State Government/ Sate						
00	Government Autonomous Body/ PSU fully or partially finance by the state govt. (T	o'					
	be written clearly)						
	Whether the employee is to be considered as an employee of Cer	ntral					
	Government/Central Government Autonomous body/PSU fully or partially financed	l by					
	Govt. of India/State Government/ Sate Government Autonomous Body/ PSU full	y or					
09	partially finance by the state govt. (Any one of the above to 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 substant	itive					
	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	n					
	admission is sought						
10	<ol> <li>Children of transferable and non-transferable Central government employ and children of ex- servicemen.</li> <li>Children of transferable and non-transferable employees of Autonon Bodies / Public Sector Undertaking/Institute of Higher Learning of Government of India.</li> <li>Children of transferable and non-transferable State Government employee</li> </ol>	nous the					
	<ol> <li>Children of transferable and non-transferable employees of Autonon Bodies/ Public Sector Undertakings/Institute of Higher Learning of the S Governments.</li> <li>Children from any other category i.e., all those not covered under an the categories 1 to 4 listed above.</li> </ol>	State					
			(i)	Pay Level	:		
			(ii)	Pay :			
			(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	

Place: \_\_\_\_\_\_
Date: \_\_\_\_\_