



KENDRIYA VIDYALAYA NO.2 BALASORE

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. **Hard Coy (Print Out) of the Online Application Form/Registration Form.** Paste the **Colour Passport size photo** of the child on it.
2. **Birth Certificate** issued by the competent authority showing date of birth(Keep the Original for verification & attach a photocopy)
3. **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 – **Tenant agreement from First Class Magistrate/Executive Magistrate** along with electricity bill of the Landlord.
4. **Self-declaration** about Submission of documents, the distance of the residence from KV No.2 Balasore (The format may be downloaded from the Vidyalaya Website).
5. Certificate of Proof of **Blood Group**
6. **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.
7. **OBC (Non-Creamy Layer)** Certificate issued by the competent authority – should not be older than three years.It should be issued on or after **01.04.2024**
8. 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.

9. 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/MGNREGA

OR

(c) **Antodaya Anna Yojana(AAY)** Card + Low Income Certificate/ EWS Certificate/MGNREGA 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. **Valid Handicapped Certificate** issued by the competent authority certifying that she/he is a child with Special Needs (CwSN) – those claiming CwSN. **(40%)**

11. **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**) Supported by **Photo Copy of Transfer Orders**– Format may be downloaded from the Vidyalaya Website

12. **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

13. For government **employees** – **ID card** issued by the employee/last month's **pay slip**

14. 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).

15. **Aadhar Card** (Child, Father, Mother)

16. Any other documents as required by the admission committee as per the demand of the situation

NOTE: Different Formats are available in Vidyalaya Website.

PRINCIPAL

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 per guidelines of KVS and any benefit accrued by me or my ward shall be summarily cancelled.

Date:

Signature of the Parent/Guardian

Place:

Self Declaration for distance between school and residence

I father/mother of
bearing Application Submission Codedeclare
that the radial distance between school and our residence
iskm.

Date:.....

Signature of the parent

APPLICATION FORM FOR ISSUANCE OF INCOME & ASSET CERTIFICATE

1. Personal Details

Name of the Applicant _____

Father's / Husband's Name _____

Gender _____ Marital Status _____

Age _____ Religion _____

Mobile No. _____ Aadhaar No. _____

e-Mail ID _____



2. Family Details

Father's Name _____

Mother's Name _____

Spouse Name _____

Sibling Details _____
(Below the age of 18 years)

Children Details _____
(Below the age of 18 years)

3. Permanent Address

Village / Town _____ Police Station _____

Post Office _____ Tahasil _____

R.I. Circle _____ District _____

Pin _____ State _____

4. Present Address

Village / Town _____ Police Station _____

Post Office _____ Tahasil _____

R.I. Circle _____ District _____

Pin _____ State _____

5. Submitter's Details

Submitter's Name (*in case the submitter is not the applicant*) _____

Relation with Applicant: _____

6. Purpose _____

7. **Gross annual income of the family**

| Sl.No. | Source | Income(in Rs.) |
|--------------|--------------------------------|----------------|
| 1. | Salary | |
| 2. | Business | |
| 3. | Agriculture | |
| 4. | Profession | |
| 5. | Other sources (Please specify) | |
| Total | | |

8. **Asset Details**

| Sl.No. | Asset | Area (in sq.yd / sq.ft) | Location |
|--------|--|-------------------------------|----------|
| 1. | Agricultural land | | |
| 2. | Residential Flat | | |
| 3. | Residential Plot in urban area (Municipal Corporation/Municipality/NAC) | | |
| 4. | Residential Plot in areas other than the urban areas stated above (Rural Area) | | |

N.B: 1 sq.yd = 9 sq.ft

9. **List of Documents attached**

- i. Copies of RoR / documents in support of all asset
- ii. Voter ID / Aadhaar Card
- iii. Copy of salary certificate, if any
- iv. IT returns of last financial year, if any

10. **Declaration:**

I, Shri/Miss/Mrs. _____ son of / daughter of / wife of _____ age _____ of _____ (presently residing at village/town), PO _____ PS _____ District _____ of the State, Odisha, do hereby declare that the information given by me in this application form and its self-attached enclosures is true to the best of my knowledge and that the information furnished is exhaustive and I have not suppressed any fact. That, I am solely responsible for the accuracy of the declaration and information furnished and liable for action under section 199 and 200 of the Indian Penal Code in case of wrong declaration and information. Also, I am well aware of the fact that the certificate shall be summarily cancelled and all the benefits availed by me shall be summarily withdrawn in case of wrong declaration and information.

Place:
Date:

Signature of the Applicant/
Authorized Representative

Government of Odisha

**INCOME & ASSET CERTIFICATE TO BE PRODUCED BY
ECONOMICALLY WEAKER SECTIONS**

Certificate No. _____ Date _____

VALID FOR THE YEAR _____

This is to certify that Shri/Smt./Kumari _____ son/daughter/wife of _____ permanent resident of _____ Village / Street _____ Post Office _____ District _____ in the State/Union Territory _____ Pin Code _____ whose photograph is attested below belongs to Economic Weaker Sections, since the gross annual income* of his/her "family"*** is below Rs.8.00 lakh (Rupees Eight Lakh only) for the financial year _____. His/her family does not own or possess any of the following assets***:

- I. 5 acres of agricultural land and above;
 - II. Residential flat of 1000 sq.ft. and above;
 - III. Residential plot of 100 sq.yards and above in notified municipalities
 - IV. Residential plot of 200 sq.yards and above in areas other than the notified municipalities
2. Shri/Smt./Kumari _____ belongs to the _____ caste which is not recognized as a Scheduled Caste, Scheduled Tribe and Other Backward Classes (Central List)

Recent Passport
size attested
photograph of the
applicant

Signature with seal of Office _____
Name _____
Designation _____

*Note 1: Income covered all sources i.e. salary, agriculture, business, profession, etc.

**Note 2: The term "Family" for this purpose include the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years.

***Note 3: The property held by a "Family" in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.

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 / केन्द्रीय रिज़र्व पुलिस बल / सीमा सुरक्षा बल / एन.एस.जी. / एस.पी.जी / सी.आई.एस.एफ. / केन्द्रीय 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

.....

स्थानांतरण संख्या प्रमाण पत्र / CERTIFICATE OF NUMBER OF TRANSFERES

मैं.....नाम.....(रैंक/पदनाम).....(कार्यालय), एतद द्वारा प्रमाणित करता/करती/ हूँ कि पिछले सात साल (01.04.2018 से अब तक) में एक स्थान से दूसरे स्थान पर मेरे(अंकों व शब्दों में) स्थानांतरण हुए जिनका विवरण नीचे दिया गया है।

I,.....(Name).....(rank/designation) of.....(office), do hereby that during the past 7 years (from 01.04.2018 onward) I have been transferred..... Times (in figures & in words) from one station to another, the details of which are given as under :-

| स्थान से/ Office/ Unit and Place | अवधि दिनांक से/ Date of joining the Office/ Unit | अवधि दिनांक तक / Date of release from the Office/U nit | ठहरने की अवधि /Period of Stay (in month s) | स्थान तक/ Transferr ed Office/ Unit and Place | दूरी (किमी)/Distanc e between the two Office (in km) | स्थानांतरण आदेश संख्या/Transf er Order No. |
|--|--|---|--|---|---|---|
| | | | | | | |
| | | | | | | |
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| | | | | | | |

मैं जनता/जानती हूँ कि यदि उपरोक्त तथ्य गलत पाए गए तो मेरा बच्चा केन्द्रीय विद्यालय में प्रवेश के लिए अयोग्य हो जाएगा।

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

स्थान/ Place.....

दिनांक/ Date.....

माता /पिता के हस्ताक्षर

Signature of Parent

प्रतिहस्ताक्षर/ **Countersignature**

मैं.....नाम.....(रैंक/पदनाम).....(कार्यालय), एतद द्वारा प्रमाणित करता/ करती हूँ कि उपरोक्त विषय विवरण को कार्यालय- आलेखों से जांच लिया गया है व सही पाया गया है।

I,.....(Name).....(rank/ designation)of.....(unit/ department) hereby certify that the particulars given in above have been authenticated by the records held in the office and found correct.

स्थान/Place.....

दिनांक/Date

सक्षम अधिकारी के हस्ताक्षर

(नाम, पद और कार्यालय की मोहर सहित)

Signature of Competent Authority

(with Name, Designation and Office Stamp)

कार्यालय का पूर्ण पता एवं दूरभाष संख्या.....

Complete Address and Telephone No. of Office.....

टिप्पणी/ Note:

1. स्थान पर ठहरने की अवधि कम से कम छह मास होनी चाहिए।
1. Minimum period of posting/stay at a place should be minimum six months.

CERTIFICATE FROM THE EMPLOYER

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

1. Sri/Smt./Ms. _____ Designation _____ working in the office of _____ department of _____ government of _____ do hereby certify the following in respect of Sri./Smt./Ms. _____ whose son/daughter _____ is seeking admission in **Kendriya Vidyalaya No.2 Balasore** for the academic session **2025-26**

| | | |
|----|---|---|
| 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 in presently posted | |
| 07 | Status of Employment (Whether Permanent/Regular/Temporary/Contractual/Part Time/Adhoc/Daily Wage Basic/Casual –To be written clearly) | |
| 08 | No. of Transfers in Last 07 Years and it details | |
| 09 | This office/organization is Central Government/Central Government Autonomous body/PSU fully or partially financed by Govt. of India/State Government/State Government Autonomous Body/PSU fully or partially finance by the state govt. (To be written clearly) | |
| 10 | Whether the employee is to be considered as an employee of Central Government/Central Government Autonomous body/PSU fully or partially financed by Govt. of India/State Government/State Government Autonomous Body/ PSU fully or partially finance by the state govt. (Any one of the above to be written clearly) | |
| 11 | 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 government employees and children of ex-servicemen. This will also include children of Foreign National official, who come on Deputation or transfer to India on invitation by govt. of India. 2. Children of transferable and non-transferable Employees of Autonomous Bodies/ Public Sector Undertaking/ Institute of Higher Learning of the government of India. 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 | |
| 12 | Recent Pay/Salary of the Employee with proper Split up | I. Pay Level: _____ II. Pay: _____ III. DA: _____ IV. HRA: _____ V. Any Other: _____ VI. Any Other: _____ VII. Total: _____ |
| 13 | Whether the employee is drawing the consolidated pay | YES/NO |

Place:

Date:

Signature of the Certifying Authority with Seal

Complete Address of the Office

Telephone Number _____

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

.....

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 दिनांकको 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

.....