ADMISSION DOCUMENTS:

KENDRIYA VIDYALAYA HINJILICUT 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.
- 3. Hard Coy (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. Self-declaration about Submission of documents, the distance of the residence from KV Hinjilicut & 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.
- 9. 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 **Economically** Valid claiming Weaker Section should submit valid documents i.e. " 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.

- 12. 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
- 14. 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)
- 19. 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		
PAR	T-A (Details of the Child)		
	. Name of the Child :		
2	2. Class to which admission sought : I (Class One)		
	3. Session : 2025-26		
4	Application Submission Code :		
5	5. Selected under the category of : RTE/ CwSN/Cat-I/Cat-III/SC/S	ST/OBC(NCL)
6	5. Serial Number in the Selection List :		
PAR	T-B (Documents submission by the parent)		
	self-attested copy (Except cases where original is mentioned) of the following	ing docun	nents are submitted b
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		

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)

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

CwSN Certificate (Specify % of disability and type of disability in Remarks

Service Certificate & Certificate showing no. of transfers (ORIGINAL)

(Specify category of employee i.e. state govt./central govt. etc. in Remarks

Certificate from the employer – in prescribed format available in Vidyalaya

Transfer Orders (Specify number of transfers in preceding 7 years as on

Employee ID card/Last month's pay slip (Specify Employee Code in Remarks

For Ex-Service Man ID proof/Discharge Book (Specify the date of discharge

For Ex-Service Man Certificate of transfers counter signed by the Authority

(ORIGINAL) - (Specify no. of transfers in Remarks Column)

Column)

Column)

Column)

Any Other

Website (ORIGINAL)

in Remarks Column)

31.03.2025 in the remarks column)

Aadhar Card (Child, Father, Mother)

12

13

14

15

16

17

18

19

20

केन्द्रीय विद्यालय हिन्जिलिकाटु / KENDRIYA VIDYALAYA HINJILICUT प्रवेश के लिए प्रार्थना पत्र /APPLICATION FOR ADMISSION

प्रवेश संख्या / Admission No,	प्रवेश की तिथि/ Date of Admission:	
	Office Use Only	

Fresh/ KVTV	Class	Sec tion	Admission Category	Social Catego ry	Boy/ Girl	Minority Community (If Yes Religion)	Parent's Deptt/ Occupation	Admission Guidelines Provision/ Para	Authority Letter No.	Average Class Strength as on the date of Admission

To be filled by the Parent ⊥

	To be filled by the	<u>ie Parent</u> ↓
क्रम सं.Sl.N o.	विशेषताएँ/Particulars	जानकारी / Information
1	विद्यार्थी का नाम/Name of the Student	
2	जन्म तिथि/Date of Birth	
3	आयु 31.03.2025 🏿 / Age (As on 31.03.2025)	Year Month Days
4	राष्ट्रीयता/Nationality	
5	माता – पिता का ब्योरा /D	etails of Parent
i	माता का नाम/Mother's Name	
ii	पिता का नाम/Father's Name	
iii	माता का व्यवसाय (पद नाम)/Mother's Occupation (with designation)	
iv	पिता का व्यवसाय (पद नाम)/ Father's Occupation (with designation)	
v	कार्यालय का नाम /Name of Office and Full Address with Telephone Number (Father/Mother)	
vi	पूर्ण आवासीय पता व दूरभाष संख्या/Full Residential Address with Telephone Number	
vii	स्थायी घर का पता / Permanent House Address	
	वेतन 01.04.2025 Pay as on 01.04.2025	BasicPay:Rs.
viii	4(1) 02.04.2023 Tay as 011 01.04.2023	Total EmolumentsRs.
ix	31.03.2025 तक पिछले 7 वर्षो में हुए स्थानान्तरणों की संख्या /Number of transfers during last 7 years as on 31.03.2025	
XX	प्रवेश की श्रेणी (माता – पिता)/Admission Category of Parent(I/II/III/IV/V)	
6	स्थानीय अभिभावक का पता (यदि उपयोग)/Name & Address of Local Guardian (if any & Applicable)	
7	अंतिम विद्यालय जहाँ पढ़ा हो/Name and address of the school last attended with class	
8	क्या यह केन्द्रीय विद्यालय था या मान्यता प्राप्त/अमान्यता प्राप्त विद्यालय था /Whether it was Kendriya Vidyalaya/Recognized/Unrecognized School	
9	विगत परीक्षा परिणाम /Result of Last Examination & Percentage of Marks	
10	जिस कक्षा में प्रवेश चाहिए/Class to which admission is sought	
11	लिये जाने वाले प्रस्तावित विषय /Subject proposed to offer	
12	क्या स्थानान्तरण प्रमाण पत्र संलग्न हैं (हां/नहीं) / Whether the transfer certificate is attached (Yes/No)	
13	स्थानान्तरण प्रमाण पत्र की संख्या वो तिथि / No. & Date of transfer certificate	
14	मातृ भाषा व गृह नगर/Mother tongue & Home Town	Mother tongue:, Home Town:
15	क्या विद्यार्थी अनुसूचित जाति /जनजाति/ओ.वी.सी./सामान्य से हें / Whether the student belongs to Schedule Caste/Schedule Tribe/OBC/General	
16	अल्पसंख्यक समुदाय है? Whether Minority Community / धर्म निर्दिष्ट करें/Specify Religion	

Signature	of	the	Parent:
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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/Date	e:	माता-पि	ोता के हस्ताक्षर/Sig	nature of Parents	
	केवल कार्या	लय के प्रयोग के लिए	/FOR THE C	OFFICE USE ONLY	
	 या जाता हें कि मैंने आवेदन – '	पत्र और सम्बद्ध कागजातो		Certified that I have checked	I the application form
and the rel	evant papers are found in or	der.		Admission In charg	ge
सम्बद्ध क	गगजातों के निरीक्षणं	ोंपरान्त एवं शुल्क to Class:	प्राप्तोपरान्त व Section :	नक्षा वर्ग after checking the	Please admit
finalise the	dues.				1 1
दिनांक/Dai	te:			प्राचार्य / PRINCIPAL	
दाखिला दिय	ग गया । Admitted to Class :	Section	on :	_	
प्राप्त धन का	विवरण। Details of Fees rec	ceived:			
शुल्क रसीद	क्र.। Fee Receipt No		तिथि। Date:		
प्रवेश तिथि	/Admission Fee : Rs		शिक्षा शुल्क /Tui	ion Fee: Rs.	<u></u>
वि.वि.एन. ध	शुल्क /VVN Fund : Rs	कम्प्युटः	र शुल्क /Computer	Fund : Rs.	<u></u>
कम्प्युटर वि	ज्ञान शुल्क /Computer Scien	ce Fee : Rs	कुल शुल्व	5 / TOTAL : Rs	कक्षा उपस्थिति
	ाम दर्ज किया गया /Name has				
दिनांक/Dat	te:			कक्षा अध्यापक/ Class Teacher	<u>.</u>
प्रमाणित कि	त्या जाता हें कि समस्त प्रविष्टिय	गाँ छात्र पंजिका में दर्ज की	ो गयी एवं शुल्क का	भुगतान इस कार्यालय कक्षा अध्य	ापक के द्वारा प्राप्त किया
गया। / Ce	rtified that all the entries h	ave been made in the	Scholar's Regist	er and the dues have been rea	lised by Office/Class
Teacher.		N. 64 . 1		** 1	
ावद्याथा का	छात्र पाजका सख्या / The S.R	.No. of the student is _		Vol. :	
दिनांक/Dat	te:		कार्याल	य प्रभारी /Office In-charge	
		फ़ार	इल/FILE		
दिनांक/Dat	te:			प्राचार्य/PRINCIPAL	ر.
			T OF DOCUME	NTS	
	V/ARMY TC: cuments with No. & Date of	Teene.			
Sl.No.	Name of the Document	Number	Date of Issue	Remarks	

KENDRIYA VIDYALAYA HINJILICUT STUDENT INFORMATION FOR ENTRY IN UBI PORTAL

Year of Admission in this KV	2025
	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)	

SELF DECLARATION (Submission of Documents & Information)

1	age	years	Father /Mother	: 01
Master/Miss			resident	of
		(Comj	plete Address)	, do
	ation given in admission form of the a			
Hinjilicut and in the enclosed do	ocuments is true to the best of my know	wledge and l	belief and nothing	, has
·	ell aware of the fact that if the information	· ·	-	
	sion has to be deemed cancelled and I v	•	-	
	it accrued by me or my ward will be sum		•	, per
Date :	Signature of the	he Parent		
Place :				
_	ool to Residence) – For Candidate Age		_	
I Mastau/Miss				J
Master/Miss	Residence addre		on Submission Coc oned in the	10.
Registration Form				
((Complete Address as mentioned in the Or	nline Registi	ration Form), do	
hereby declare that the distance b is km .	petween Kendriya Vidyalaya Hinjilicut a	nd the above	e mentioned reside	nce
Date :	Signature of the	he Parent		
Place :	Mobile No :			
	<u>UNDERTAKING</u>			
(Submis	ssion of SC/ST/OBC/BPL/EWS Ce	ertificate)		
I			nereby declare that	
	n-Creamy Layer/BPL/EWS issued by the	_	-	
of my child the date of admission of my ward	(Name of the Chi d in Kendriya Vidyalaya Hinjilicut. If I fa		3 (Three) months f the same in the nar	
	e admission of my ward will be summarily			
Data	Ciamatana - Cal	ha Danaut		
Date :Place :	Signature of the Mobile No :			

SERVICE CERTIFICATE (CENTRAL GOVERNMENT)

Certified tha	t Sri/Smt.					is worki	ing as a
regular/permar	nent/tempor	ary/contractu	al/part	time/casual emp	loyee ii	n the capa	acity of
			in	this office/Mini	•		•
				rnment of India. He			
				vt./Central Govt. Auto			
		ed by the C	entral C	ovt. His/her service	s are non-	transferable / t	ransferable
anywhere in Ir							
Complete Add	ress and tel	<u>ephone No. a</u>	of the Of	<u>fice (in Block Letters)</u>	ı		
Place:				Signature of Head	l of the Off	ice	
Place: Date:			(wi	ith Name, Designation			
		CERTIFIC	CATE O	F NUMBER OF TRA	ANSFERS		
I				(Nama)			(rank
/designation) o	of.			(Name)(Name	e of the Of	fice), do hereby	
<i>'</i>		p to 31.03.20	25) I hav	re been transferred			
				stance between the fo			
		etay is six m	onths the	en only it will be con	sidered as	a transfer). The	details of
which are give							
		entioned fact	s are fou	nd incorrect, my child	will be dis	qualified for adm	iission in
Kendriya Vidy	alaya.						
	Date of	Date of	Period		Distance		7
Office/Unit	Joining	Release	of stay	Transferred	between the Two	Transfer Order	
and Place	the Office/	from the	(in	Office/Unit and Place	Office (in	No.	
	Unit	Office/Unit	days)		km)		
							4
							4
							-
							-
							_
				7	gnature of the	he Parent	
				TER SIGNATURE			
I ,							
montionless six	on in oborro			he Office/Unit/Depart	/	•	
particulars giv	en in above	nave been au	шеписат	ed by the records held	in the offic	e and found corr	eci.
Place:				Signature of Head	d of the Off	ice	
Date:			(wi	ith Name, Designation			

SERVICE CERTIFICATE (STATE GOVERNMENT)

Certified that	at Sri/Smt.							_ is w	orking	as a
regular/perma	nent/tempora	ary/contractua	_		/Mini	stry	under/	the	capacity Ministr	y o
1	Ct-t- Ct	/ 54-4- 64		_government						
				omous body/S her services ar					•	
	, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·			. o mon t		.010 / 0.		.c uily ,,,	
Complete Add	dress and tel	ephone No. of	the Of	fice (In Block	<u>Letters)</u>	-				
							_			
Place: Date:			(wi	Signature th Name, Desi				ımn)		
Date.			(W)	ili Nailie, Desi	gnation	and On	iice Sta	шру		
		<u>CERTIFIC</u>	ATE O	F NUMBER (OF TRA	ANSFE	<u>RS</u>			
I				(Name)	0.7	0.1	0.00	e), do here		(rank
/designation)	of ct 7 vears (Ui	n to 31 03 202	5) I hav	e been transfer	_ (Nam red	e of the	Office	e), do here time	eby certi s (In fig	
in words) from	n one station	to another. (1)	f the di	stance between	the for	rm and	to plac	e is at lea		
		tay is six moi	nths the	en only it will	be con	sidered	as a t	ransfer).	The det	ails o
which are give		D-46	D			Distan	ce			
Office/Unit and Place	Date of Joining the Office/ Unit	Date of Release from the Office/Unit	Period of stay(in days)	Transferr Office/Unit an		betwee the Tw Office (km)	o 11	ransfer Or No.	der	
		entioned facts	are four	nd incorrect, m	ny child	will be	disqua	lified for	admissio	on in
Kendriya Vid	yaiaya.									
			COLINI	TED CICNAT	-	gnature (of the F	Parent		
I.		(Nam	<u>COUN</u> ne)	TER SIGNAT	UKE	(Ranl	κ/Desig	nation) o	of	
		(Na	me of the	ne Office/Unit/	Departi	ment) he	reby c	ertify that	the	
particulars giv	en in above	have been autl	henticat	ed by the recor	rds held	in the c	ffice a	nd found	correct.	
Place:				Signature						
Date:			(wi	th Name, Desi	gnation	and Of	fice Sta	ımp)		

CERTIFICATE FROM THE EMPLOYER

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

I	Sri/Smt./Ms.		lame	of	the	Employer)	,
desig	nation workir	ıg	in	the		office	of
	department of	C 11 '	•		,	government	
	do hereby certify the (Name of	following the	in Empl	respect	of whos	Sri/Smt./ e son/da	Ms.
	(Name of the Chil			•			_
01	Name of the Child for whom admission is sought (in Block Letters)		5				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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						
0.7	Status of Employment (Whether Permanent/ Regular/ Temporary/Contractual/						
07	Part Time/ Adhoc/Daily Wage Basis/Casual -To be written clearly)						
	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						
	Government/Central Government Autonomous body/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						
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 government						
	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. 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 Le	evel :		_	
		(ii)	Pay:_				
		(iii)	DA : _				
11	Recent Pay/Salary of the Employee with proper Split up	(iv)	HRA:				
		(v)		ther			
		(vi)		ther:			
		(vii)	Total:				
12	Whether the employee is drawing the consolidated pay			Y	ES / NO		
		<u></u>					

Place: ______
Date: _____