केन्द्रीय विद्यालय न.२ अंगुल, / **KENDRIYA VIDYALAYA NO.2 ANGUL**

प्रवेश के लिए प्रार्थनापत्र /APPLICATION FOR ADMISSION

प्रवेश संख्या / Admission No. _____ प्रवेश की तिथि/ Date of Admission:_____

क्रम सं. Sl. No.	विशेषताएं /Particulars	जानकारी / Information
1	विद्यार्थी का नाम/Name of the Student	
2	जन्म तिथि /Date of Birth	
3	आयु 01.04.2026 को/Age (As on 01.04.2026)	Year _____ Month _____ Days_____
4	राष्ट्रीयता /Nationality	
5	माता-पिता का ब्योरा /**Details 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, पूरा पता व दूरभाष संख्या/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	
viii	वेतन 01.04.2026 को Pay as on 01.04.2026	BasicPay:Rs._____ Total EmolumentsRs. _____
ix	31.03.2026 तक पिछले 7 वर्षों में हुए स्थानांतरणों की संख्या /Number of **transfers during last 7 yearsas on 31.03.2026**	
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	लिए जाने वाले प्रस्तावित विषय /Subject proposed to offer	
12	क्या स्थानांतरण प्रमाणपत्र संलग्न हैं (हां/नहीं) / Whether the transfer certificate is attached (Yes/No)	
13	स्थानांतरण प्रमाणपत्र की संख्या व तिथि / No. & Date of transfer certificate	
14	मातृभाषा व गृह नगर/Mother tongue & Home Town	Mother tongue: _____ , Home Town:_____
15	क्या विद्यार्थी अनुसूचित जाति/जनजाति/ओ.वी.सी/सामान्य से हैं / Whether the student belongs to Schedule Caste/Schedule Tribe/OBC/General	

WhatsApp No (Both parents): _____
BLOOD GROUP:_____
Email id:_____
AADHAR NO.:_____
PEN(If already created):_____

माता-पिता के द्वारा घोषणा / DECLARATION BY THE PARENT

मैं एतद द्वारा घोषणा करता/करती हूँ की मेरे द्वारा दी गई उपर्युक्त सूचना मेरी जानकारी में सत्य है। मैं विद्यालय नियमों से प्रतिवद्ध रहूँगा/रहूँगी । I hereby declare that the above information furnished by me are correct to the best of my knowledge. I shall abide by the rules of the Vidyalaya.

दिनांक/Date:_____ माता-पिता के हस्ताक्षर /Signature of Parents

केवल कार्यालय के प्रयोग के लिए /FOR THE OFFICE USE ONLY

प्रमाणित किया जाता है की मैं आवेदन-पत्र और संबंध कागजातों की जांच कर ली है। Certified that I have checked the application form and the relevant papers are found in order.

Admission In charge

संबंधित कागजातों की निरीक्षणोंपरांत एवं शुक्ल प्राप्तोपरान्त कक्षा_____वर्ग_____ में प्रवेश दें । Please admit _____ to Class: _____ Section : _____ after checking the relevant papers and finalise the dues.

दिनांक/Date : _____ **PRINCIPAL**

दाखिला दिया गया । Admitted to Class : _____ Section : _____

प्राप्त धन का विवरण । Details of Fees received :

शुल्क रसीद क्र. । Fee Receipt No. _____ तिथि/Date : _____

प्रवेश शुल्क /Admission Fee : Rs. _____ शिक्षा शुल्क /Tuition Fee: Rs. _____

वि.वि.एन. शुल्क /VVN Fund : Rs. _____कंप्युटर शुल्क /Computer Fund : Rs._____

कंप्युटर विज्ञान शुल्क /Computer Science Fee : Rs._____ कुल शुल्क / TOTAL : Rs. _____ कक्षा उपस्थिति पंजिका में नाम दर्ज किया गया /Name has been entered in the Class Attendance Register.

दिनांक/Date :_____ कक्षा अध्यापक/ Class Teacher

प्रमाणित किया जाता है की समस्त प्रविष्टियाँ छात्र पंजिका में दर्ज की गई एवं शुल्क का भुगतान इस कार्यालय कक्षा अध्यापक के द्वारा प्राप्त किया गया / Certified that all the entries have been made in the Scholar's Register and the dues have been realised by Office/Class Teacher.

विद्यार्थी की छात्र पंजिका संख्या / The S.R.No. of the student is _____ Vol. : _____

दिनांक/Date: _____ कार्यालय प्रभारी /Office Incharge फ़ाइल/**FILE**

दिनांक/Date : _____ प्राचार्य/PRINCIPAL

CHECK LIST OF DOCUMENTS	
FRESH _____	*KV/ARMY TC* _____
ADM Form No. : _____	*Original TC NO.* _____
Date of Birth Certificate: _____	*Dated:* _____
Residence Proof: _____	*Duplicate Copy of TC:* _____
Blood Group: _____	*Movement Order:* _____
Affidavit (if any): _____	*RO Verification (if any):* _____
Counter signed TC (V onwards): _____	*Service Certificate:* _____

SELF DECLARATION
(Submission of Documents & Information)

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 No.2 Angul 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.

Signature of the Parent: _____

Place: _____

Date: _____

Mobile No: _____

SELF DECLARATION
(Distance from School to Residence) – For Candidates Selected under RTE

I _____ Father /Mother of Master/Miss _____ age _____ years, bearing Application Submission Code: _____ Residence address as mentioned in the Registration Form _____

_____

_____ (Complete Address as mentioned in the Online Registration Form), do hereby declare that the distance between Kendriya Vidyalaya No.2 Angul and the above mentioned residence is _____ km.

Signature of the Parent: _____

Place: _____

Date: _____

Mobile No: _____

UNDERTAKING

(Submission of SC/ST/OBC Certificate)

I _____ (Name of the Parent) do hereby declare that I will submit the Caste Certificate (SC/ST/OBC- Non-Creamy Layer) 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 No.2 Angul. If I fail to submit the same in the name of my child within this period the admission of my ward will be summarily cancelled.

Signature of the Parent: _____

Place: _____

Date: _____

Mobile No: _____

SERVICE CERTIFICATE
(CENTRAL GOVERNMENT)

Certified that Sri/Smt. _____ is working as a regular/permanent/temporary/contractual/part time/casual employee in the capacity of _____ in this office/Ministry/under the Ministry of _____ government of India. He/She is an employee of Defence Service/CRPF/BSF/NSG/SPG/CISF/Central Govt./Central Govt. Autonomous body/Central govt. PSU fully financed/partially financed by the Central Govt. His/her services are non-transferable / transferable anywhere in India.

Complete Address and telephone No. of the Office

_____

_____

Place: _____ Signature of Head of the Office
Date: _____ (with Name, Designation and Office Stamp)

CERTIFICATE OF NUMBER OF TRANSFERS

I _____ (Name) _____ (rank /designation) of _____ (Name of the Office), do hereby certify that during the past 7 years (Up to 31.03.2023) 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***:***

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

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

SERVICE CERTIFICATE (STATE GOVERNMENT)

Certified that Sri/Smt. _____ is working as a regular/permanent/temporary/contractual/part time/casual employee in the capacity of _____ in this office /Ministry /under the Ministry of _____ _____government of _____. He/She is an employee of State Govt. / State Govt. Autonomous body/State Govt. PSU fully financed by the State Govt./partially financed by the state Govt. His/her services are non-transferable / transferable anywhere in _____. ***Complete Address and telephone No. of the Office***

_____

_____

Place: _____ Signature of Head of the Office
Date: _____ (with Name, Designation and Office Stamp)

CERTIFICATE OF NUMBER OF TRANSFERS

I _____ (Name) _____ (rank /designation) of _____ (Name of the Office), do hereby certify that during the past 7 years (Up to 31.03.2023) 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

COUNTER SIGNATURE

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

CERTIFICATE FROM THE EMPLOYER

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

I Sri/Smt./Ms. _____ (Name of the Employer) , designation_____ working in the office of _____department of _____ , government of _____ do hereby certify the following in respect of Sri/Smt./Ms. _____ (Name of the Employee) whose son/daughter _____ (Name of the Child) is seeking admission in Kendriya Vidyalaya No.2 Angul.

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)	
08	This office/organization is **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. (To be written clearly)	
09	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 be written clearly)	
10	**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 officials, 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	
11	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 :
12	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: _____