CHECK LIST OF DOCUMENTS

	PART-A	(Details	of the	Child)
--	--------	----------	--------	--------

1.	Name of the Child	:
2.	Class to which admission sought	: I (Class One)
3.	Session	: 2021-22
4.	Application Submission Code	:
5.	Selected under the category of: RTE	/Cat-I/Cat-II/SC/ST/OBC(NCL)/DA/SAQ
6.	Serial Number in the Selection List	:

PART-B (Documents submission by the parent)

The self-attested copy (Except cases where original is mentioned) of the following documents 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	Handicapped 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 31.03.2021 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	For Single Girl Child Affidavit (ORIGINAL) – (Specify the date of issue in Remarks Column)				
20	Aadhar Card (Child, Father, Mother)				
21	Any Other				

Contact Number:

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)

Verifying Officer -1

Verifying Officer-2

Remarks:

Signature:

Name & design.:

I/C Admission

Counter Signed by the Principal

PAGE: 1 of 2

PLEASE PRINT PAGE 1 & PAGE 2 ON BOTH SIDES OF A SINGLE PAPER

केन्द्रीय विद्यालय न.5) भुवनेश्वर/KENDRIYA VIDYALAYA No.5 BHUBANESWAR

प्रवेश के लिए प्रार्थनापत्र /APPLICATION FOR ADMISSION

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

Sl. No. क्रम सं.	विशेषताएँ/Particulars	जानकारी / Information
1	विद्यार्थी का नाम/Name of the Student	
2	जन्म तिथि /Date of Birth	
3	आयु 01.04.2021 को /Age (As on 01.04.2021)	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 , 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	वेतन 01.04.2021 को Pay as on 01.04.2021	Basic Pay: Rs Total Emoluments Rs
viii	31.03.2021 तक पिछले 7 वर्षों में हुए स्थानान्तरणों की संख्या /Number of transfers during last 7 years as on 31.03.2021	
ix	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	

PAGE: 2 Of 2 (Please Print this Page on the Reverse of Page-1)

माता-पिता के द्वारा घोषणा / DECLARATION BY THE PARENT

में एतदद्वारा घोषणा करता /करती हूँ कि मेरे द्वारा दी गई उपर्युक्त सूचना मेरी जानकारी मै सत्य है। मै विद्यालय नियमों से प्रतिबद्ध 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/Da	te:		माता-पिता के हस्ताक्षर/Signature of Parents				
	केवल कार्यालय वे	ь प्रयोग के लिए /FO]	R THE OFFICE	USE ONLY			
प्रमाणित कि		जातों की जांच कर ली है। C	ertified that I have cl	hecked the application form and the relevant			
papers a	re found in order.						
				Admission In charge			
सम्बद्ध का	गजातों के निरीक्षणोंपरान्त एवं शुल्क	प्राप्तोपरान्त कक्षा	वर्ग	में प्रवेश दें । Please admit			
				after checking the relevant papers and			
finalize t	the dues.						
दिनांक /Da	ate :	_		PRINCIPAL			
दाखिला दिय	ग गया। Admitted to Class :	Section:					
	विवरण। Details of Fees received:						
शुल्क रसीद	क्र. । Fee Receipt No		तिथि। Date:				
	/Admission Fee : Rs			ee: Rs			
			· ·				
वि.वि.एन.	शुल्क /VVN Fund : Rs	कम्प्युटर शुर	क/Computer Fund:	Rs			
कम्प्युटर विः	ज्ञान शुल्क /Computer Science Fee : R	S	कुल शुल्क / TOTAL :	Rs कक्षा उपस्थिति पंजिका में नाम			
दर्ज किया ग	या /Name has been entered in the C	lass Attendance Reg	gister.				
दिनांक /Da	nte :		क्ष	क्षा अध्यापक/ Class Teacher			
प्रमाणित कि	या जाता हें कि समस्त प्रविष्टियाँ छात्र पंजिका में र	र्ज़ की गयी एवं शुल्क का <u>श</u>	ग्गतान इस कार्यालय कक्षा अ	अध्यापक के द्वारा प्राप्त किया गया। /			
	es have been made in the Scholar's	_	-				
विद्यार्थी की	छात्र पंजिका संख्या / The S.R.No. of th	e student is	Vol.	:			
दिनांक /Da	nte:		का	र्यालय प्रभारी /Office Incharge			
			FILE	-			
المنت الم	to .		<u> </u>	प्राचार्य/PRINCIPAL			
199197100	ite:		OF DOCUMENTS	SIGNAL MINCH AL			
FRESH	/KV/ARMY TC :	CHECK LIST C	T DOCUMENTS				
List of D	Occuments with No. & Date of Issu	e:					
SI.No.	Name of the Document	Number	Date of Issue	Remarks			

KENDRIYA VIDYALAYA No.5 BHUBANESWAR STUDENT INFORMATION FOR ENTRY IN UBI PORTAL

Year of Admission in this KV	2021
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 /Mother of Master/Miss
	age years , resident of
	(Complete Address) ,
do hereby declare that the inform	nation given in admission form of the admission in Kendriya Vidyalaya
•	nclosed documents is true to the best of my knowledge and belief and
	ein. I am well aware of the fact that if the information given by me is
-	nt of time, admission has to be deemed cancelled and I will be liable for
punishment as per guidelines of	KVS and the benefit accrued by me or my ward will be summarily
cancelled.	
Date :	2 5 1 11 2 7
Place:	Mobile No :
	SELF DECLARATION
(Digto	
т	rance from School to Residence) Father /Mother of Master/Miss
	Father /Mother of Master/Miss age years , bearing Application Submission
	Present resident of
Address) de benebro de clare th	(Complete
and our residence is	nat the radial distance between Kendriya Vidyalaya No.5 Bhubaneswar km
	KM .
Doto	Cionatuma of the Domant
Date:Place:	
	UNDERTAKING
(Suhmi	ission of SC/ST/OBC Certificate)
,	
	(Name of the Parent) do hereby declare that I (SC/ST/OBC- Non-Creamy Layer) issued by the competent authority in
	(SC/S1/OBC- Non-Creamy Layer) issued by the competent authority in [Name of the Child) within 03 (Three)
	on of my ward in Kendriya Vidyalaya No.5 Bhubaneswar. If I fail to
	ny child within this period the admission of my ward will be summarily
cancelled.	- · · · · · · · · · · · · · · · · · · ·
Date : Place :	Signature of the Parent Mobile No :
1 1acc	

SERVICE CERTIFICATE (CENTRAL GOVERNMENT)

Certified that Sri/Smt.		1		is working as			
	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/Cent fully financed/partially financed by the Canywhere in India. Complete Address and telephone No. of the Complete Address	entral Govt. His/he		•	•			
Place: Date:	Signatur (with Name, De	re of Head of tesignation and		np)			
CERTIFICAT	E OF NUMBER	OF TRANSF	<u>ERS</u>				
I	.2021) I have been other. (If the distants six months then	(Name of transferred _ nce between to only it will be	the Office the form an	e), do hereby certi- times (ad to place is at lead d as a transfer). T	ify (In <i>ast</i> The		
Office/Unit and Place Date of Joining the Office/ Unit Unit Date of Release from the Office/Unit	stay(in Office/U	ansferred Jnit and Place	Distance between the Two Office (in km)	Transfer Order No.			
	OUNTER SIGNATION Name) me of the Office enticated by the rec	FURE e/Unit/Departr	nent) herel	nk/Designation) by certify that t	of the		
Place: Date:	Signatur (with Name, De	re of Head of t		mp)			

SERVICE CERTIFICATE (STATE GOVERNMENT)

Certif	ried that S	ri/Smt						is working as
	ar/permanent			this	office	/Ministry	/under	the capacity of the Ministry of the He/She is an
_	=	Govt. / Sta	ate Govt. Au	tonomou	s body/S	tate Govt. P	SU fully f	inanced by the Statusferable anywhere in
Comp	olete Address	and telepho	 one No. of the	e Office				
	:				-	e of Head of t		.mn)
Date.				(with iv	iame, De	signation and	Office Sta	шр)
		<u>CE</u>	RTIFICATE	OF NU	MBER (OF TRANSF	ERS	
that d figure 20 km	during the pasts & in words	st 7 years (Us) from one sinimum peri	Up to 31.03.2 station to ano iod of stay is	021) I h	ave been the distar	transferred _ nce between t	the form a	(ranke), do hereby certify times (In and to place is at least that as a transfer). The
detair	Office/Unit	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)	Transfer Order No.
	w that if the a		oned facts are	found ir	ncorrect,	my child will	be disqual	lified for admission
T			COU	UNTER	SIGNAT	URE	are of the P	
partic	ulars given i	n above have	(Name been authen	of the O ticated b	ffice/Uni	t/Department ords held in the	t) hereby co	gnation) of ertify that the nd found correct.
	:				-	e of Head of t signation and		.mp)

CERTIFICATE FROM THE EMPLOYER

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

esigna	ri/Smt./Ms working	(Nan g in		of the		mployer) fice
csigna	department of	g III		tiic		vernment
	do hereby certify the	following	in	respect	of	Sri/Smt./M
	(Name of	U	Emplo	-	ose	son/daugh
	(Name of the Chil			•		_
huban	eswar	,			•	, ,
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/					
07	Part Time/ Adhoc/Daily Wage Basis/Casual -To be written clearly)					
	This office/organization is Central Government/Central Government					
08	Autonomous body/PSU fully or partially financed by Govt. of India/State					
00	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	ral				
	Government/Central Government Autonomous body/PSU fully or partial	lly				
09	financed by Govt. of India/State Government/ Sate Government Autonomo	us				
	Body/ PSU fully or partially finance by the state govt. (Any one of the above	to				
	be written clearly)					
	Please write any one of the following which is applicable i.r.o. the child for					
	whom admission is sought					
10	 Children of transferable and non-transferable Central governme employees and children of ex- servicemen. This will also inclu children of Foreign National officials, who come on deputation transfer to India on invitation by Govt. of India. Children of transferable and non-transferable employees Autonomous Bodies / Public Sector Undertaking/Institute of High Learning of the Government of India. Children of transferable and non-transferable State Government of India. 	de or of eer				
	employees.					
	 Children of transferable and non-transferable employees Autonomous Bodies/ Public Sector Undertakings/Institute of High Learning of the State Governments. 					
	5. Children from any other category					
		(i)		ay Level:		
		(ii)		ay:		
		(iii)		A:		
11	Recent Pay/Salary of the Employee with proper Split up	(iv)		RA:		
		(v)	A	ny Other		
		(vi)	A	ny Other:		_
		(vii)	T	otal:		
12	Whether the employee is drawing the consolidated pay			Y	ES / NC)

Date: ___

Signature of the Certifying Authority with Seal

Co	implete Address of the Office:
Telephone Number	:

AFFIDAVIT FOR SINGLE GIRL CHILD

Rs. 100/- Stamp Paper (Notary) Affidavit

[aged	years , Indian inhabitant
occupation		Resident of
mother/father of		Date of Birth
	submitting my undertaking to the	Head of the Institution for
admission of my daughter		in Class-I (One) vide KVS
Admission Guidelines 2021-22		
1. I hereby declare that Miss		is the only girl child
in my family (with no male/	female sibling). I understand that it sha	all be my sole responsibility to
inform you about any change	e in status of Single Girl Child in the far	mily immediately, if and when
it occurs.		
2. I am also aware that in cas	se it is detected at any time that the af	ffidavit sworn by me is false,
appropriate action will be tal	ken by the school authorities and KVS a	gainst me.
Signature of Father	Signatur	re of Mother
Residential Address with Co	ontact Number:	
Solem	nnly affirmed at:	
This	(Day) of(Month) of 2021 (Year)
Explained and Identified by	me,	

Advocate