

D.A.V. PUBLIC SCHOOL



(Under the management of DAV College Managing Committee, New Delhi, 55)

SECL, Gevra Area, Dist : Korba (C.G.), 495452

Phone No.: 07815-275194, E-mail:davps.gevra@rediffmail.com

Aff. No.: 3330015

School code : 15049

School website : www.davgevra.in

ADMISSION FORM

SESSION - _____

Form No.:

Affix Here
Passport Size
Photograph
With Name
(Size 5x4 cm)
and white
background

Recommendation of the Admission Committee:

Admitted to Class - _____

Status: _____

Admission I/C

Adm. Associate

Principal

For Office Use Only

Admission No: _____

Date: _____

Accountant /Clerk _____

STUDENT DETAILS

1. Name of the student

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(In block letters):

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2. Date of Birth: (DD/MM/YYYY)

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3. Date of Birth (In words): _____

4. Age as on 1st April: _____ Years: _____ Months: _____ Days: _____ Gender: M/ F

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5. Nationality: _____ Mother Tongue: _____

6. Name of the father (In Block Letters):

7. Educational Qualification: _____ Contact No:

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Father's Occupation: _____ Departmental Address: _____

8. Name of the Mother (In Block Letters):

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Educational Qualification: _____ Contact No.

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Mother's Occupation : _____ Departmental Address (if any): _____

9. Guardian's Name (if any) : _____ Relation: _____

10. Address: _____ Contact No: _____

11. Caste: _____ Category (SC/ST/OBC/GEN): _____

12. Belongs to BPL: _____ BPL Card No: _____

_____ (If the category is SC/ST/OBC) please submit self attested photocopy of the Certificate from the competent authority)

PWD (Person with disability) if yes mention category (Attach Medical Certificate) _____

13. Religion: _____ Blood Group: _____ Eye Sight: _____

14. Aadhar no of child : _____

15. Name of the Bank: _____ Name of the Branch: _____

16. Bank IFSC Code: _____

17. Fees Scheme (SECL/N SECL/Single girl Child/RTE/Staff ward): _____

18. Address (present): _____

19. Address (Permanent): _____

20. Contact Information : Mobile No. A)

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 B)

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21. E-mail Address : _____

22. If under SECL, following certificate should be signed by the competent authority:

SECL EMPLOYEES CERTIFICATE

Certified that Mr./Mrs. _____ employee Code No _____ is a regular employee of the SECL in _____ Project/Area and as/Executive/MR/Dr/Trainee and as per the service record his Son/Daughter _____ is entitled for fee concession as per the agreement made by SECL with the DAV College Managing Committee New Delhi.

a) Name of the Verifying Officer : _____

b) Designation of the Officer: _____

c) Project/Area : _____

d) Sign with seal : _____

Area Personal Manager
Sign With Seal

Departmental Head
Sign With Seal

23. Previous School Details :

- a) Name of the School: _____
- b) Last Class Attended with the result and Attendance: _____
- c) Promoted to next Class (Y/N) _____
- d) T.C. Serial No.: _____ Date: _____

24. Enclosures:

- | | Y | N | |
|----|--------------------------|--------------------------|---|
| a) | <input type="checkbox"/> | <input type="checkbox"/> | Transfer Certificate in Original. |
| b) | <input type="checkbox"/> | <input type="checkbox"/> | Xerox of Previous Class Mark Sheet. |
| c) | <input type="checkbox"/> | <input type="checkbox"/> | Xerox of Birth Certificate. |
| d) | <input type="checkbox"/> | <input type="checkbox"/> | Xerox of Caste Certificate. |
| e) | <input type="checkbox"/> | <input type="checkbox"/> | Xerox of SECL Employee Identity Card. |
| f) | <input type="checkbox"/> | <input type="checkbox"/> | Xerox of SECL Salary slip of parents. |
| g) | <input type="checkbox"/> | <input type="checkbox"/> | Medical certificate (Blood Group Certificate & Eye Sight Certificate mandatory)
in original by registered medical practitioner of the student. |
| h) | <input type="checkbox"/> | <input type="checkbox"/> | Xerox of Student's and parents (both Mother and Father) Aadhar Card. |
| i) | <input type="checkbox"/> | <input type="checkbox"/> | Xerox of front page of bank pass book (Child/father). |
| j) | <input type="checkbox"/> | <input type="checkbox"/> | If BPL /RTE, Xerox of the BPL Card front page with voter's Identity Card. |
| k) | <input type="checkbox"/> | <input type="checkbox"/> | Original Income Certificate (RTE only) |
| l) | <input type="checkbox"/> | <input type="checkbox"/> | Original Migration Certificate is mandatory only for class XI |

Note : Admission will be given only after the submission of all relevant documents mentioned above.

Declaration by Parents

I hereby declare that the particulars given in respect of my Son/Daughter are true to the best of my knowledge and shall not request the authorities for any alteration in date of birth, spellings of names etc given above.

place : _____

Full Name of Parent _____

Date : _____

Signature _____