



REGISTRATION FORM FOR ADMISSION IN "PM SHRI KV NO.2 RAIPUR" SESSION: 2024-25

(For Office use only)

Reg. No: _____ Class: _____ Adm Cat: _____ No. Transfer: _____

Gen/ SC/ST/OBC/EWS/BPL /CWSN: _____ RTE (Yes/ No): _____

A recent passport size photograph to be attached

1.	Class Applied :	Balvatika : 3		
2.	पूरा नाम /Full Name :			
3.	जन्म तिथि /Date of Birth (in figure) :			
4.	जन्म तिथि /Date of Birth (in words) :			
5.	आयु/Age as on 31.03.2024:	Years	Months	Days
6.	लिंग /Gender (Male /Female/Third Gender):			
7.	परिवार की आय-Family Income Group (EWS*/BPL*) :			
8.	दिव्यांग /CWSN (Yes/No) :			
9.	जाति वर्ग /Caste Category : (SC/ST/OBC (NCL) /GEN/			
10.	बच्चे का आधार क्रमांक यदि उपलब्ध है/ Aadhar Number (if available) :			
11.	रक्त समूह /Blood Group :			
12.	Applied for RTE (Yes/No) : RTE के लिए आवेदन :			
13.	धर्म / Religion			

Details of Parents		Mother's Details	Father's Details
13.	पूरा नाम /Full Name :		
14.	राष्ट्रीयता /Nationality :		
15.	घर का पता / Residential Address :		
16.	केंद्रीय विद्यालय से दूरी (किमी में) /Distance from KV (in KM) :		
17.	व्यक्तिगत मोबाइल नंबर/ Personal Mobile Number :		
18.	व्यक्तिगत ईमेल /Per. Email :		
19.	व्यवसाय /Occupation :		
20.	संस्था का नाम /Organisation :		

21.	अभिभावक मे पिता/माँ का चुनाव करे जिनकी सेवा श्रेणी एवं स्थानांतरण के आधार पर प्रवेश का निर्णय Select the parent whose Service Category and Transfers are to be considered for Admission :	<input type="checkbox"/> Father <input type="checkbox"/> Mother
22.	सेवा श्रेणी Service Category of the parent: (1/2/3/4/5). 1- Central Govt.*2. Central Govt. Autonomous.* 3. State Govt.* 4. State Govt. Autonomous.* 5. Private / Others	*Refer admission guidelines on KVS website.
23.	यदि चयनित माता /पिता का पिछले ७ वर्षों में स्थानांतरण हुआ हो -/ Whether parent has been transferred in last 7 years:	<input type="checkbox"/> YES <input type="checkbox"/> NO
24.	If Yes, Number of transfers in Last 7 years. Duly signed format is to be attached in such case.	
25.	वार्षिक वेतन /Annual income :	
26.	कार्यालय का पता / OFFICIAL ADDRESS:	

* Subject to Verification of the Documents as per the KVS Admission Guideline / Circulars

मैं एतदु द्वारा घोषणा करता/करती हूँ कि मेरी जानकारी के अनुसार नामांकन प्रपत्र में दी गयी सारी सूचनाएं सत्य एवं प्रमाणिक हैं। मैं यह भी घोषित करता/करती हूँ की यदि नामांकन प्रपत्र एवं संलग्न दस्तावेजों में कोई सूचना गलत/असत्य पाई जाती है तो मेरे पाल्य/पाल्या का नामांकन बिना कारण बताए रद्द करने का अधिकार केन्द्रीय विद्यालय प्राधिकारी को प्राप्त है। मैंने केन्द्रीय विद्यालय में नामांकन से सम्बंधित सभी सूचनाओं का अध्ययन किया है एवं सभी शर्तों, नियमों एवं प्रक्रियाओं से सहमत हूँ।

I hereby declare that I have read and understood the KVS admission guidelines 2024-25. All information provided by me in the registration form are true, complete and correct to the best of my knowledge and belief. I also declare that later if any documents or information being found invalid/untrue/incorrect, the admission of my ward will be cancelled by the Kendriya Vidyalaya Authority without assigning any reasons thereof and agree to abide by the rules, regulation and procedures of admission in Kendriya Vidyalaya.

दिनांक /Date: _____

पिता/माता / अभिभावक का हस्ताक्षर /Signature of the Father / Mother / Guardian
पूरा नाम /Full Name: _____

संलग्न दस्तावेजो की सूची /List of Documents to be attached/ Check List (by Office only):

1.	Registration Form	
2.	Date of Birth Certificate (Self Attested)	
3.	Photograph (2 copies)	
4.	Service certificate/Ex-Serviceman / Appointment Letter (if Govt. Servant)	
5.	Copy of recent pay slip, NPS statement and the front page of service book (if Govt. Servant)	
6.	Transfer Format by the competent authority (if Govt. Servant of preceding 7 years)	
7.	Proof of certificate in case of SC/ST/OBC (Non Creamy Layer)	
8.	EWS*/BPL* (with name of the Father)	
9.	CWSN/PH Certificate	
10.	Residence Proof with Self-declaration residence Format (RTE*)	
11.	ID Proofs/Aadhaar of Parents and Child* (*if any)	
12.	Electricity / Gas bill in the name of either parent	

CHECK LIST OF DOCUMENTS

PART-A (Details of the Child)

1. Name of the Child : _____
2. Class to which admission sought : Balvatika-3
3. Session : 2024-25
4. Application Submission Code : _____
5. Selected under the category of : _____
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) CWSN		
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.		
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	Aadhar Card (Child, Father, Mother)		
20	Any Other		

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

KENDRIYA VIDYALAYA No.2 RAIPUR
STUDENT INFORMATION FOR ENTRY IN UBI PORTAL

Year of Admission in this KV	2024
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 & Religion	
BPL (Yes/No)	
Mobile Number	
Email	
Blood Group	
Aadhar No.	
Account No.	
Account label	
IFSC Code	
Select for Payment: <small>Q1(Apr-Jun)/ Q2(Jul-Sep)/Q3(Oct-Dec)/Q4(Jan-Mar)</small>	
Eligible for Reimbursement (Yes/No)	
Admission Under RTE (Yes/No)	
Exemption under Sibling (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 information given in admission form of the admission in Kendriya Vidyalaya No.2 Raipur 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.

Date : _____
Place : _____

Signature of the Parent
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 Raipur and the above mentioned residence is _____ km .

Date : _____
Place : _____

Signature of the Parent
Mobile No : _____

UNDERTAKING
(Submission of SC/ST/OBC-NCL/EWS Certificate)

I _____ (Name of the Parent) do hereby declare that I will submit the Caste Certificate (SC/ST/OBC- Non-Creamy Layer/EWS) 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 Raipur . 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.

Date : _____
Place : _____

Signature of the Parent
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: _____
Date: _____

Signature of Head of the Office
(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 preceding 7 years . 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: _____
Date: _____

Signature of Head of the Office
(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: _____
Date: _____

Signature of Head of the Office
(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 preceding 7 years. 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:

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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: _____
Date: _____

Signature of Head of the Office
(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 Raipur

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/ <i>Central Government Autonomous body</i> /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: _____