



केन्द्रीय विद्यालय क्रमांक: 2 , वायु सेना केन्द्र, आदमपुर

Kendriya Vidyalaya No. 2, AFS Adampur

Regd. No.

क्रम सं./ S. No

सत्र / Session – 2020-21

पंजीकरण के लिए कक्षा / Registration for Class

photo

1. विद्यार्थी का पूरा नाम (स्पष्ट शब्दों में) Name of Child in full (in Capital Letters)

लिंग / Sex : पुरुष / Male स्त्री / Female तृतीय लिंग / Third Gender

दिन/Day

मास/Month

वर्ष/Year

2. जन्म – तिथि (अंकों में)/Date of Birth (in Figure)

शब्दों में / In Words

31.03.2020 तक आयु / Age as on 31.03.2020 वर्ष/Year मास/Month दिन/Day

3. बच्चे का रक्त समूह (Rh फैक्टर सहित) Blood Group of the Child (With Rh Factor)

4. बच्चे की संबन्धित श्रेणी / The category to which child belong [please attach relevant certificate.]

General SC ST OBC EWS BPL Diff Abled S.G. Child

If the child belongs to SC/ST/OBC/EXS/BPL/Disabled/S.G. Category, then

5. Service Category Cat I Cat II Cat III Cat IV Cat V

* 31.03.2020 तक पिछले सात वर्ष में स्थानांतरणों की संख्या / No of transfers during last 7 years as on 31.03.2020

* 1. केन्द्रीय सरकार/Central Govt. * 2. केन्द्रीय सरकार के स्वायत्त संस्थान/ Autonomous bodies of Central Govt.

* 3. राज्य सरकार / State Govt. 4. राज्य सरकार के स्वायत्त संस्थान/ Autonomous bodies of State Govt.

* 5. अन्य / Others

विद्यालय से आवास की दूरी। दूरी के लिए माता-पिता / अभिभावक का सपथ-पत्र मान्य है। आवास प्रमाण -पत्र देना आवश्यक है। /

Distance of Residence from Vidyalaya.Undertaking from parents is acceptable for distance.Proof of Residence is compulsory.

6. माता-पिता का विवरण / Details of Mother/Father-

क्र.सं.		माता / Mother	पिता / Father
(i)	नाम स्पष्ट शब्दों में Name (in Capital Letters)		
(ii)	राष्ट्रीयता / Nationality		
(iii)	व्यवसाय / Occupation		
(iv)	कार्यालय का नाम , पूरा पता व दूरभाष Name of Office and Full Address and Telephone Number		
(v)	पूर्ण आवासीय पता व दूरभाष (प्रमाण सहित) Full residential address and Tel. No (With proof)		
(vi)	विद्यालय से दूरी (कि.मी. में) Distance from KV (in km) *		
(vii)	मूल वेतन / Basic Pay		
(viii)	स्थानांतरणों की संख्या No. of Transfers **		
(ix)	माता-पिता की श्रेणी Category of the Parent #		
(x)	कर्मचारी कोड (यदि है तो) Employee Code (if any)		

मैं एतद द्वारा यह प्रमाणित करता/करती हूँ कि उपर्युक्त पृविष्टियाँ मेरी जानकारी में सत्य हैं।

I certify that the above entries are true to the best of my knowledge.

Signature of Mother / Father / Guardian

दिनांक/Date.....

पूरा नाम / Full Name.....

सेना प्रमाण-पत्र / SERVICE CERTIFICATE (केंद्रीय सरकार / Central Govt.)

Certified that Shri/Smt is working as regular employee in the Office/Ministry of He/She is a regular employee of Defence Service/ CRPF/ BSF / NSG / SPG / CISF Central Govt. / Autonomous Body / Public Sector Undertaking fully financed / partially financed by Central Govt. and his/her service are non-transferrable/transferrable anywhere in India.

स्थान / Place _____

दिनांक / Date _____

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

Complete Address and Telephone No. of Office _____

सेना प्रमाण-पत्र / SERVICE CERTIFICATE (राज्य सरकार / State Govt.)

Certified that Shri/Smt is working as regular employee in the Office/Ministry of and his/her service are non-transferrable/transferrable anywhere in State.

स्थान / Place _____

दिनांक / Date _____

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

Complete Address and Telephone No. of Office _____

सेवा - कालीन मृत्यु प्रमाण-पत्र / DIES IN HARNESS CERTIFICATE

(केवल केंद्रीय सरकार के कर्मचारियों के लिए / Only for Central Govt. Employees)

Certified that Master / Miss is the son/daughter of Late Sh./ Smt Who has regular Employee of (Office/ Department) and he/she died in harness(while service) on (date).

स्थान / Place _____

दिनांक / Date _____

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

Complete Address and Telephone No. of Office _____

स्थानांतरण संख्या प्रमाण-पत्र / CERTIFICATE OF NUMBER OF TRANSFERS

में _____ (नाम) _____ (रैंक / पदनाम) _____ (कार्यालय), एतद द्वारा प्रमाणित करता / करती हूँ पिछले 7 साल (31.03.2020 तक) में एक स्थान से दूसरे स्थान पर मेरे _____ (अंकों व शब्दों में) स्थानांतरण हुए जिनका विवरण नीचे दिया गया है - I, _____ (Name) _____ (Rank/Designation) of _____ (office), do hereby certify that during past 7 years (up to 31.03.2020) I have been transferred _____ times (in figures & in words) from one station to another , the details of which are given as under :-

क्र.सं. S. No	कार्यालय / यूनिट Office / Unit	स्थान Place	रैंक/पदनाम Rank / Designation	दिनांक / Date		ठहरने की अवधि Period of Stay	आदेश संख्या Order No.
				से / From	तक / To		
1							
2							
3							
4							
5							
6							
7							

I know that if the above mentioned facts are found incorrect, my child will be disqualified for admission in Kendriya Vidyalaya.

Signature of Parent

प्रतिहस्ताक्षर / Countersignature

I,(name) (rank/designation) of (unit/department) hereby that the particulars given in above have been authenticated by the records held in the office and found correct.

स्थान / Place _____

दिनांक / Date _____

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

Complete Address and Telephone No. of Office _____

टिप्पणी / Note :-

एक स्थान पर ठहरने की अवधि कम से कम छह मास होनी चाहिए ।

Minimum period of posting /stay at a place should be minimum six months

KENDRIYA VIDYALAYA NO.2, AFS, ADAMPUR, DOABA (JALANDHAR)**OPTION FORM FOR ADMISSION IN CLASS XI (2020-21)**

Admission No.....

(For office use only)

Stream Applying For:-

Science/Commerce/Humanities

Paste your
Photograph

Stream Available	Subject Core
Science	1. English , Physics, Chemistry, Biology, Hindi, Physical Education 2. English , Physics, Chemistry, Biology, CS, Physical Education 3. English , Physics, Chemistry, Maths, Hindi, Physical Education 4. English, Physics, Chemistry, Maths, CS, Physical Education
Commerce	1. English, Economics, Accountancy, B.St, Hindi, Physical Education 2. English, Economics, Accountancy, B.St, IP, Physical Education
Humanities	1. English, History, Geography, Pol Sc, Hindi, Physical Education

Bio Data

1.	Name of the Candidate (In Block Letters)	
2.	Father's Name (In Block Letters)	
3.	Local Residence Address	
4.	Official Address	
5.	Occupation of Father/Mother	
6.	Whether GEN/SC/ST/OBC	
7.	Contact No.(Compulsory)	
8.	Year of Passing class X with Board and name of the school	Year _____ Board _____ School _____
9.	Marks obtain in Class X	Marks obtained/CGPA _____ Max marks _____ %age _____
10.	Subject Wise Marks/Grade obtained	English _____ Hindi _____ Maths _____ Science _____ Social Science _____ Comp Science _____
11.	Highest Level of Participation	Sports _____ Scouts & Guides _____ Adventure Activities(Duration) _____ (Must attach Certificate, if any)
12.	Subject Opted	1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____

Note:-

Please attach the following documents:

1. Attested photocopy of mark sheet of class X /Copy of the marks sheet from internet/photocopy of the Gazette.
 2. Certificate of higher level of participation (for the session 2015-16) in sports. Scouts & Guides or Adventure Activities.
 3. SC/ST/OBC Certificate if applicable
 4. Incomplete Forms are liable to be cancelled.
 5. Copy of Aadhar Card
 6. Copy of Blood Group
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UNDERTAKING

We, _____(Student) and _____(Parent) hereby give undertaking that the above given option for Stream and Subjects for Class XI has been offered by us after due consideration and that our decision is final in this regard. We also submit that no request regarding change if stream or/subject(s) will be made by us in future.

Signature of student

Signature of parent

Place _____

Date _____

Admission of _____ permitted in class XI _____(Stream) with subjects

I/C Admission

Principal