

Website: <http://inchilka.kvs.ac.in/>

केन्द्रीयविद्यालय

भा. नौ. पो. चिल्का

खुर्धा

ओड़िशा - 752037

दूरभाष: 06756-257203

फैक्स: 06756-257203



E-mail: kvchilkappl@gmail.com

KENDRIYA VIDYALAYA

INS CHILKA

CHILKA (KHORDHA)

Odisha-752037

Ph.no.: 06756-257203(O&R)

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Ref. No. F.150331(1)/1/KVC/1161/2021-22/

Dated: 08/04/2021

## **प्रवेश सूचना / ADMISSION NOTICE (CLASS-II ONWARDS)** **SESSION 2021-22**

Applications are invited to **fill vacant seats only in Class-III, IV, VI & IX** on K V INS Chilka. Registration forms along with all related documents (documents attached) may be downloaded from the Vidyalaya website (<https://inschilka.kvs.ac.in>). The duly filled in and scanned applications with all documents in pdf format (in one file) are to be sent to [admissionkvchilka@gmail.com](mailto:admissionkvchilka@gmail.com) between 08/04/2021 and 15.04.2021. No other modes of communication shall be entertained.

The application forms so received shall be processed by the Vidyalaya as per KVS Admission Guidelines 2021-22 and provisional selected list of candidate will be uploaded in the Vidyalaya website as per schedule. Documents as required at the time of admission will be produced by the parents on the given date and time in a dedicated box to be kept in the Admission Department of the Vidyalaya.

Admission for Class-IX will be conducted on 16<sup>th</sup> April 2021 (08:30 a.m to 11:30 a.m). All candidates are instructed to come with valid ID Proof for entry at the Main Gate INS Chilka and follow Covid-19 guidelines including wearing Mask and social distancing.

### **Documents required:**

- 1. Birth Certificate :-** Issued by the Competent Authority
- 2. Caste Certificate:** (Caste certificate must be in the name of the candidate , the caste certificate in the name of the parent may be considered, but it has to be submitted in the name of the child within 3 months of admission)
- 3. Residence proof :-** House agreement with electricity bill of the owner /Voter Id. / LPG connection / Telephone Bill/Residential Certificate (any two)
- 4. Service Certificate:** - In case of service person, Service Certificate and transfer details should be submitted in the format uploaded in the KVS website / given in the online portal for admission duly signed by the DDO.
- 5. Transfer Certificate** indicating details of transfer of parents in last 07 years
- 6. Aadhar Card**
- 7. Any other documents** as required under Admission Guidelines in support of any claims made

Please visit KVS website (<https://kvsangathan.nic.in/>) for further details and contact Help Desk for further queries.

Admn I/C.

प्रचार्य/Principal



केन्द्रीय विद्यालय \_\_\_\_\_, सभाग \_\_\_\_\_

Kendriya Vidyalaya \_\_\_\_\_, Region \_\_\_\_\_

केन्द्रीय विद्यालय संगठन

पंजीकरण पत्र/Registration Form

Paste latest  
Photograph of  
ChildClass :  Reg. No. : 

1. विद्यार्थी का पूरा नाम (स्पष्ट शब्दों में)

Name of the Child in full (in Capital letters): .....

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

2. जन्म तिथि (अंकों में) / Date of Birth (in figure) : दिन / Day मास / Month वर्ष / Year

शब्दों में / In words : .....

3. 31.03.2021 तक आयु/ Age as on 31.03.2021 वर्ष / Year मास / Month दिन / Day

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

5. बच्चे की सम्बंधित श्रेणी General SC ST OBC-CL OBC-NCL EWS BPL Diff. Abled SG Child (Attach Certificate\*)

Category to which child belong: 

6. आधार कार्ड नंबर/Aadhar Card Number:.....

7. माता पिता का विवरण/Details of Mother&amp; Father:

क्र.सं. S.No.		माता/Mother	पिता / Father
(i)	नाम (स्पष्ट शब्दों में)/ Name ( In Capital Letter)		
(ii)	राष्ट्रीयता (Nationality)		
(iii)	व्यवसाय (Occupation)		
(iv)	कार्यालय का नाम, पूरा पता व दूरभाष / Name of the Office, Full Address & Telephone Number.		
(v)	पूर्ण आवासीय पता व दूरभाष (प्रमाण सहित)/ Full Residential Address & Telephone No. (With Proof)		
(vi)	विद्यालय से दूरी (कि.मी. में)/Distance from KV in KM.		
(vii)	मूल वेतन / Basic Pay		
(viii)	पिछले 7 वर्षों में स्थानान्तरण की संख्या/ No of Transfers in last 7 years (As on 31/03/2020)		
(ix)	माता-पिता की सेवा श्रेणी/ Service Category of Parent		
(x)	कर्मचारी कोड (यदि है तो ) / Emp. Code (If Any)		
(xi)	E-Mail Id:		

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

दिनांक/Date:

अभिभावक के हस्ताक्षर/Signature of Guardian

## सेवा प्रमाण-पत्र/SERVICE CERTIFICATE

(केन्द्रीय सरकार/Central Govt.)

प्रमाणित किया जाता है कि श्री/श्रीमती-----, पद-----

कार्यालय/मंत्रालय में नियमित कर्मचारी के रूप में कार्यरत है। वे रक्षा सेवा/ केन्द्रीय रिजर्व पुलिस बल/एस.एस.बी./ असम राइफल्स /आई.टी.बी.पी./सीमा सुरक्षा बल/एन.एस.जी./एस.पी.जी./सी.आई.एस.एफ./केन्द्रीय सरकार स्वायत्त सस्था अथवा सार्वजनिक क्षेत्र के उपक्रम जो पूर्ण या आंशिक रूप से केंद्र सरकार से वित्त-पोषित है, के नियमित कर्मचारी हैं तथा उनकी सेवा अस्थानांतरणीय है/पूर्ण भारत में कहीं भी स्थानांतरणीय है।

Certified that Shri/Smt.....Designation.....is working as regular employee in the office/Ministry of ..... He/She is a regular employee of Defence Service /ITBP/ CRPF/BSF/NSG/SPG/CISF/SSB/Assam Rifles/Central Govt./Autonomous Body/Public Sector Undertaking fully financed /partially financed by Central Govt. and his/her services are non-transferable/transferable anywhere in india

कार्यालय अध्यक्ष के हस्ताक्षर

(नाम, पद और कार्यालय की मोहर सहित)

Signature of Head of the Office

(With Name, Designation and Office Stamp)

स्थान/Place \_\_\_\_\_

दिनांक/Date \_\_\_\_\_

कार्यालय का पूर्ण पता एवं दूरभाष संख्या \_\_\_\_\_

Complete address and Telephone No. of office \_\_\_\_\_

## सेवा प्रमाण-पत्र/SERVICE CERTIFICATE

(राज्य-सरकार/State Govt.)

प्रमाणित किया जाता है कि श्री/श्रीमती-----, -----  
-----कार्यालय/मंत्रालय में नियमित कर्मचारी के रूप में कार्यरत है। तथा उनकी सेवा अस्थानांतरणीय है/पूर्ण राज्य में कहीं भी स्थानांतरणीय है।

Certified that Shri/Smt..... is permanently working in the office/Ministry of ..... and his/her services are non-transferable/transferable anywhere in State.

कार्यालय अध्यक्ष के हस्ताक्षर

(नाम, पद और कार्यालय की मोहर सहित)

Signature of Head of the Office

(With Name, Designation and Office Stamp)

स्थान/Place \_\_\_\_\_

दिनांक/Date \_\_\_\_\_

कार्यालय का पूर्ण पता एवं दूरभाष संख्या \_\_\_\_\_

Complete address and Telephone No. of office \_\_\_\_\_

**स्थानांतरण संख्या प्रमाण-पत्र/CERTIFICATE OF NUMBER OF TRANSFERS**

मैं, \_\_\_\_\_ (नाम) \_\_\_\_\_ (रैंक/पदनाम) \_\_\_\_\_ (कार्यालय),  
 एतद द्वारा प्रमाणित करता/करती हूँ पिछले सात साल (31.03.2020 तक) में एक स्थान से दूसरे स्थान पर मेरे  
 \_\_\_\_\_ (अंको व शब्दों में) स्थानांतरण हुए जिनका विवरण नीचे दिया गया है-

I, \_\_\_\_\_ (Name) \_\_\_\_\_ (rank/ designation) of \_\_\_\_\_ (office), do  
 hereby certify that during the 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. स. 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.							

मैं जानता/जानती हूँ कि यदि उपरोक्त तथ्य गलत पाए गए तो मेरा बच्चा केन्द्रीय विद्यालय में प्रवेश के लिए  
 अयोग्य हो जाएगा। I know that if the above-mentioned facts are found incorrect, my child will be disqualified for  
 admission in Kendriya Vidyalaya.

माता/पिता के हस्ताक्षर  
 Signature of Parent

**प्रतिहस्ताक्षर/Countersignature**

मैं, \_\_\_\_\_ (नाम) \_\_\_\_\_ (रैंक/पदनाम) \_\_\_\_\_  
 (कार्यालय), एतद द्वारा प्रमाणित करता हूँ कि उपरोक्त विवरण को कार्यालय-आलेखों से जाँच लिया गया है व सही  
 पाया गया है।

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

स्थान/Place \_\_\_\_\_

दिनांक/Date \_\_\_\_\_

कार्यालय अध्यक्ष के हस्ताक्षर  
 (नाम, पद और कार्यालय की मोहर सहित)  
 Signature of Head of the Office  
 (With Name, Designation and Office Stamp)

कार्यालय का पूर्ण पता एवं दूरभाष संख्या \_\_\_\_\_

Complete address and Telephone No. of office \_\_\_\_\_

**टिपणी/Note-**

एक स्थान पर ठहरने की अवधि कम से कम छह मास होनी चाहिए।  
 Period of posting/stay at a place should be minimum six months.

**सेवा-कालीन मृत्यु प्रमाण-पत्र / DIED IN HARNESS CERTIFICATE**  
(केवल केन्द्रीय सरकार के कर्मचारियों के लिए/Only for Central Govt. Employees)

प्रमाणित किया जाता है कि कुमार/कुमारी ----- स्वर्गीय श्री/श्रीमती -----के पुत्र/पुत्री हैं जो ----- (कार्यालय/विभाग) में नियमित रूप से सेवारत थे/थीं और उनका देहावसान सेवाकाल की अवधि में दिनांक -----को हो गया था।

Certified that Master/Miss \_\_\_\_\_ is the son/daughter of Late Sh./Smt. \_\_\_\_\_ who was regular employee of \_\_\_\_\_ (Office/Department) and he/she died in harness (while in service) on \_\_\_\_\_ (date).

स्थान/Place \_\_\_\_\_  
दिनांक/Date \_\_\_\_\_

कार्यालय अध्यक्ष के हस्ताक्षर  
(नाम, पद और कार्यालय की मोहर सहित)  
Signature of Head of the Office  
(With Name, Designation and Office Stamp)

कार्यालय का पूर्ण पता एवं दूरभाष संख्या \_\_\_\_\_  
Complete address and Telephone No. of office \_\_\_\_\_

# SINGLE GIRL CHILD

Rs. 100/- Stamp paper ( Notary) Affidavit

I.....aged.....years, Indian  
Inhabitant occupation .....Resident of  
..... is mother/father of  
..... Date of Birth..... Submitting  
my undertaking to the Head of the Institution in Class I Vide KVS Admission Guidelines  
2021)

- 1) I hereby declare that Miss..... is the only girl child in my family ( with no male/female sibling). I understand that it shall be my sole responsibility to inform you about any change in status of single girl child in the family immediately, if and when it occurs.
- 2) I am also aware that in case it is detected at any time that the affidavit sworn by me is false, appropriate action will be taken by the school authorities and KVS against me.

Signature of father

Signature of mother

Residential address with  
Contact number:

Solemnly affirmed at .....  
This.....day of.....20.....

BEFORE ME

Explained and Identified by me,

Advocate

**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 \_\_\_\_\_

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 <b>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)</b>	
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	<b>Please write any one of the following which is applicable i.r.o. the child for whom admission is sought</b>  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: \_\_\_\_\_