ग्रामीण/शहरी प्रमाण पत्र

प्रमाणित किया जाता है कि माता/कुमार ने इस विद्यालय से कक्षा 10 सत्र में उत्तीर्ण की है।

यह विद्यालय ग्रामीण / शहरी क्षेत्र में आता है।

Counter Sign of BEO/DEO with stamp  (Signature of the Principal with Stamp)
<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>01.</td>
<td><strong>Name of the candidate</strong></td>
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<tr>
<td>02.</td>
<td><strong>Father's name</strong></td>
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<td>03.</td>
<td><strong>Address:</strong></td>
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<td>04.</td>
<td><strong>Date of birth</strong></td>
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<td>05.</td>
<td><strong>Height</strong></td>
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<td>06.</td>
<td><strong>Weight</strong></td>
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<td>07.</td>
<td><strong>Abdomen</strong></td>
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<td>08.</td>
<td><strong>Chest</strong></td>
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<td>09.</td>
<td><strong>Vision</strong></td>
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<td>10.</td>
<td><strong>Ears</strong></td>
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<td>11.</td>
<td><strong>Throat</strong></td>
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<td>12.</td>
<td><strong>Locomotor system</strong></td>
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<td>13.</td>
<td><strong>State of vaccination</strong></td>
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<td>14.</td>
<td><strong>Skin</strong></td>
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<tr>
<td>15.</td>
<td><strong>Blood Group</strong></td>
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<td>16.</td>
<td><strong>Dental Hygiene</strong></td>
</tr>
<tr>
<td>17.</td>
<td><strong>Remarks of Medical Officer</strong>: Recommended/not recommended for admission/Recommended to C.M.O for Verification if any.</td>
</tr>
</tbody>
</table>

**PHOTO OF THE STUDENT**

**CIVIL SURGEON**
Jawahar Navodaya Vidyalaya

ADMISSION FORM

Class in which admission is sought for: ____________________________

Session: ____________________________

1. (a) Name of the Child in Full (in Capital letters): ____________________________
(b) Sex: Male / Female

2. Date of Birth: ____________________________ / ____________________________ / ____________________________

3. Blood Group / Blood Group of the child:


5. Detail of Mother/Father:

6. Name & Address of local guardian (if any):

7. Name & Address of the School last attended with "class": ____________________________

8. Whether last school was CBSE affiliated: ____________________________

9. Whether the transfer certificate is attached Yes/No

10. (a) Marks obtained in last examination: ____________________________
(b) Result of last examination: ____________________________

11. Whether the transfer certificate is attached Yes/No

12. Mother tongue: ____________________________

13. Home Town: ____________________________

DECLARATION BY THE PARENTS

I hereby declare that the above information furnished by me is correct to the best of my knowledge & belief.__________________________ / ____________ / ____________________________

Signature of Parents
FOR THE OFFICE USE ONLY

Certified that i have checked the application form and the relevant papers are found in order.

Admission Incharge

Please admit to Class ___________ Section ___________ after checking the relevant papers and realise the dues.

Date: ___________

Principal

Admitted to Class ________ Section ________ Fee Receipt No ___________

Dated ________ Issued ________

Details of amount received:

Admission Fee Rs. ___________

Tuition Fee Rs. ___________

Any Other Fee Rs. ___________

Computer Fee Rs. ___________

Total Rs. ___________

Name has been entered in the Class Attendance Register: ( ) Yes ( ) No

Certified that all the entries have been made in the Scholar’s Register and the dues have been received.

Registration No. of the student in Admission Withdrawal Register is __________ Vol. ___________

Date: ___________

Office Supdt.

Admission considered by the school is in accordance with the provision of the Board & approved.

Date: ___________

Sign. of Principal/Official Seal
जवाहर नवोदय विद्यालय मोहम्मदपुर जिला गुडगॉव(हरियाणा)
(मानव संसाधन विकास मंत्रालय, शिक्षा विभाग, भारत सरकार)

छात्र (छात्रा का नाम)
कक्षा
पता

पिता का नाम............................................................... माता का नाम.

अभियान्त्र का नाम............................................................

छात्र/छात्रा से मिलने वाले के फोटो।