



## ACHIEVEMENTS (WRITE YES/NO)- ATTACHED A COPY OF CERTIFICATES

Sl. No.	SPORTS & GAMES		NCC		SCOUTING / GUIDING		ADVENTURE ACTIVITIES
1.	PARTICIPATION AT SGFI/EQUIVALENT	6%	'A' CERTIFICATE AND PARTICIPATION IN REPUBLIC DAY /	6%	RASTRAPATHI PURASKAR AWARD CERTIFICATE	6%	
2.	PARTICIPATION AT KVS NATIONAL / STATE LEVEL	4%	A CERTIFICATE AND BEST CADET IN DISTRICT /	4%	RAJYA PURASKAR AWARD CERTIFICATE WITH 07 PROFICIENCY BADGES	4%	
3.	PARTICIPATION AT KVS REGIONAL / DISTRICT LEVEL	2%	'A' CERTIFICATE	2%	TRITIYA SOPAN CERTIFICATE WITH 05 PROFICIENCY BADGES	2%	ATLEAST ONE 10 DAYS ADVENTURE ACTIVITY

UNDER ACHIEVEMENTS

\* MAXIMUM GRACE SHOULD NOT BE MORE THAN 6%

## SUBJECTS OFFERED

Sl. No.	STREAM	CLASS	SUBJECTS OFFERED
1.	SCIENCE	XI	Combination 1:PCMC Combination 2:PCMB Combination 3 : PCMH Combination 4: PCBH
2.	COMMERCE	XI	Combination 5: ABEH Combination 6: ABEIP Combination 7: ABEM Combination 8: ABEG
3.	HUMANITIES	XI	Combination 9 : GHHP

CHOOSE THE PREFERENCE OF SUBJECT COMBINATIONS (WRITE CODE AS GIVEN ABOVE)

1 <sup>st</sup> PREFERENCE	2 <sup>nd</sup> PREFERENCE	3 <sup>rd</sup> PREFERENCE	4 <sup>st</sup> PREFERENCE	5 <sup>th</sup> PREFERENCE	6 <sup>st</sup> PREFERENCE

SIGNATURE OF PARENT \_\_\_\_\_

SIGNATURE OF STUDENT \_\_\_\_\_

DATE:

DATE:

## OFFICE USE

TOTAL MARKS	MATHS	MATHS & SCIENCE	SC/ST 4%	PARTICIPATION	TOTAL
REG. No.	STREAM / COMBINATION	SECTION	ADMISSION No.	FEES PAID	RECEIPT No.

PREPARED BY

CHECKED BY

ADMISSION INCHARGE

PRINCIPAL

## ANNEXURE - I

### Self-Declaration Format

I \_\_\_\_\_, Father/Mother of Master / Miss  
\_\_\_\_\_ age\_\_\_\_\_ years,  
resident of \_\_\_\_\_ (complete address), do hereby  
declare that the information given admission form of the admission in  
Kendriya Vidyalaya, \_\_\_\_\_ 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 be  
dimmed cancelled and will liable to punishment as per guidelines of KVS  
and the benefit accrued by me or my ward shall be summarily cancelled.

Date:-

Place:

Signature of the Parent/Guardian