## **ODISHA ADARSHA VIDYALAYA SANGATHAN**

(Revised Application Form for OAV Entrance Test-2021-22 for Class-VI & Lateral Entry for Class VII, VIII & IX)

Index No.	CLASS TO BE ADMITED:-	Paste a recent passport size photograph here and staple another for use in Admit card		
(	All information should be filled up in block letters)			
1. Name of the child seeking admission:				
2. Name of the mother :				
3. Name of the father :				
4. Class to be admitted :				
5. Sex :	Boy Girl			
6. Caste : S	SC ST GEN (Put tick mark)			
7. If belong	to following Categories :			
(a)	Person with Disability: Yes/No			
(b)	If yes, Category of disability: (HI/VI/OH)			
(c)	If Son/ Daughter of employee of OAV :(Yes/No) (outsourced to be excluded) (If yes attach certificate from Head of the office)			
(d)	If Son/ Daughter of employees of State Govt./			
	State PSUs: (Yes/No) (Attach certificate from the employer)			
8. Nationali	ty:			
9. Date of E	Birth (a) In figures DD MM YYYY			
	(b) In words:			
10. Mother	(c) Age as on 01.04.2021:	-		
11. i.	Aadhar No. of the child: (UID/VID/EID)			
ii.	Aadhar No. of the Father/Guardian: (UID/VID/EID)			

iii. Aadhar No. of the Mother: (UID/VID/EID)

12.	Whether the child is suffering from any Chronic/ serious disease. (Yes/No) If yes, state the nature of disease.		
13.	Name of the previous School where the child was/is reading:		
14.	Whether the school is a Govt./Aided . (Yes/No). (Please add a certificate from the DEO and clearly mention the category of the School) Whether recognized school and has got CoR from the Govt. of Odisha.(Yes/No). If yes annex a photocopy of CoR duly attested by the Principal/Headmaster.		
	Signature of the Principal/Headmaster Office Seal		
15.	Contact No. of Parent (s) : / Email Id		
16.	(a) Present address with Pin Code :		
	(b) Permanent address with Pin Code :		
17.	Account Details:-  i. Name of the Bank:  ii. Account No.:  iii. IFSC Code:		
	Signature/T.I. of the Parents/guardian		
18.	Study Certificate from the Head of the Institution:  Certified that Shri/Kum.  S/D of is a bonafied student of Class-5 <sup>th</sup> / 6 <sup>th</sup> / 7 <sup>th</sup> / 8 <sup>th</sup> of this institution. His/ Her date of Birth is and Admission No Date as per Admission Register. The data furnished are correct to the best of my knowledge.		

## **DECLARATION OF THE PARENT**

- 1. We do hereby certify that the above information is correct to the best of our knowledge and belief. If any information is found fake/forged, the admission of our child may stand cancelled.
- 2. We do undertake that, our child and we shall abide by the rules and regulations laid down by Odisha Adarsha Vidyalaya Sangathan (OAVS), Bhubaneswar from time to time.
- 3. We do understand that, the decision of the empowered committee of OAVS is final and binding on us regarding admission.
- 4. We certify that, we are the bonafide Parent / Guardian of the Child.

Signature of the Mother	Signature of the Father
Date	Date

Name & Signature of the Legal Guardian with date (if parent(s) not alive)