

PM SHRI KENDRIYA VIDYALAYA SAHARSA
NOTICE: 31.03.2024

ADMISSION TO BALVATIKA (PRE-PRIMARY) - III (2024-25)

This is for the information of all concerned that, KV SAHARSA has been selected as one of the KVs to start the Balvatika (Pre-Primary) classes for the academic year 2024-25 as mandated by NEP 2020. As it will be opened in a pilot mode, there will be one section for Balvatika -III. The children admitted into these classes will be automatically promoted to higher classes* (As per KVS admission Guideline). There will be no more fresh admission into class I for these sections. The details of the registration are as under:

1. **Registration opened on** : **01.04.2024 at 8:00 a.m.**
2. **Registration will be closed on** : **15.04.2024 at 12:30 p.m.**
3. **Registration form submission** : **8:00a.m. to 12:30 p.m. (at the Vidyalaya Office Help Desk)**
4. **Eligibility Age Criteria** :

Class	Age (as on 31 st March 2024)
Balvatika III	Attained 5 years but not completed 6 years

5. **Documents required to Registration for admission:**

- a. Filled in Registration Form (As Annexure A).
- b. Self-Attested copy of the Date of Birth (DOB) Certificate of the child issued by the competent authority. Original to be submitted at the time of admission for verification.
- c. Self-Attested copy of the certificate issued by competent authority for SC/ST/PH or DA/OBC (Non-creamy layer certificates should have been issued *on or after 01.04.2020*) /EWS*/BPL* if applicable (for admission under RTE) in the name of the parent along with original for verification.
- d. Two recent passport-size photographs of child.
- e. Proof of residence (Voter ID/Bank Passbook/Gas Connection/recent Telephone or Electric Bill etc.)
- f. An Undertaking by the parent stating the distance from residence to the school which is mandatory for admission in the RTE category. As per RTE act, the radial distance from the school to the residence should be less than or equal to 5 Kms.
- g. For Central/State Govt. employees, a copy of the Service certificate of the parents issued by competent authority in the prescribed format (As Annexure B), recent paid slip (pay slip) of last 2 Months, front page of the service book duly attested by DDO, which can be sent for verification (if required). Further, to supplement the claim, a copy of the appointment Order/Regular Order/NPS statement /any other formats (if required) duly attested by DDO may be required for the proof of the service/service category.
- h. For Ex-service man, a copy of the discharge book/ PPO/ Ex-service man identity card issued by Zilla Sainik Board where residential address is clearly mentioned can be submitted.
- i. In case of the Govt. employees the details of transfers during the last 7 years (**01 Apr 2017 onwards**) are duly signed by the competent authority in the prescribed format(As Annexure C)
- j. Self-attested copy of the Aadhaar Card of the Child and Parents.
- k. Clinical proof of Blood Group with RH Factor.
- l. For Differently Abled candidates, a copy of the Disabled/PH Certificate issued by the competent authority. Original to be produced for verification.

6. The Admissions to the above classes will be made as per KVS Admission guidelines 2024-25.

For detailed information, please visit our website: <https://saharsa.kvs.ac.in/>

👉 Also, Registration form (pdf softcopy) can be shared through WhatsApp by Vidyalaya Helpdesk
If necessary contact Vidyalaya Helpdesk No. 7903516173, 7838828837.

SD/-
PRINCIPAL



Annexure A

REGISTRATION FORM FOR ADMISSION IN "PM SHRI KV SAHARSA" SESSION: 2024-25

*** यहां दर्ज की गई जानकारी को सबमिट करने के बाद संशोधित नहीं किया जा सकता।

*** Information entered here cannot be modified after submitting.

(For Office use only)

Reg. No: _____ Class: _____ Adm Cat: _____ No. Transfer: _____

Gen/ SC/ST/OBC/EWS/BPL /PH: _____ RTE (Yes/ No): _____

A recent passport size photograph to be attached

☎ WhatsApp No. of the Parent:
(Must be replied within 48 hours for verification of the registration form)

1.	Class Applied :	
2.	पूरा नाम /Full Name :	
3.	जन्मतिथि /Date of Birth (in figure) :	
4.	जन्मतिथि /Date of Birth (in words) :	
5.	आयु/Age as on 31.03.2024:	Years Months Days
6.	लिंग /Gender (Male /Female/Third Gender):	
7.	परिवार का आय / वर्ग-Family Income Group (EWS*/BPL*) :	
8.	दिव्यांग /Differently Abled (Yes/No) :	
9.	जाति वर्ग /Caste Category : (SC/ST/OBC (NCL) /GEN/	Applied for RTE (Yes/No) : _____
10.	बच्चे का आधार क्रमांक यदि उपलब्ध है / Aadhar Number (if available) :	
11.	रक्त समूह /Blood Group :	धर्म / Religion : _____

Details of Parents		Mother's Details	Father's Details
12.	पूरा नाम /Full Name :		
13.	राष्ट्रीयता /Nationality :		
14.	घर का पता / Residential Address :		
15.	विद्यालय से दूरी (में .मी.कि) /Distance from KV (in KM) :		
16.	व्यक्तिगत मोबाइल नंबर / Personal Mobile Number :*		
17.	व्यवसाय /Occupation :		
18.	संस्था का नाम /Organisation :		
19.	कार्यालय का पता /Official Address:		

20.	व्यक्तिगत ईमेल पता /Per. Email : Father : Mother:	
21.	अभिभावक मे पिता दादा / मां / दादी का चुनाव करे जिनकी / सेवा श्रेणी एवं स्थानांतरण के आधार पर प्रवेश का निर्णयSelect the parent whose Service Category and Transfers are to be considered for Admission :	<input type="checkbox"/> Father <input type="checkbox"/> Mother
22.	सेवा श्रेणी Service Category of the parent: (1 /2 /3 /4 /5). 1- Central Govt.* 2. Central Govt. Auto.* 3. State Govt.* 4. State Govt. Auto.* 5. Private / Others	*Refer Annexure D for detailed service category.
23.	यदि चयनित माता दादी का पिछले-दादा / पिता-7 वर्षों में स्थानांतरण हुआ है? / Whether parent has been transferred in last 7 years from 01 Apr 2017 onwards:	<input type="checkbox"/> YES <input type="checkbox"/> NO
24.	If Yes, Number of transfers in Last 7 years. Duly signed Annexure D is to be attached in such case.	
25.	मूल बेतन /Annual income :	

* Subject to Verification of the Documents as per the KVS Admission Guideline / Circulars:

मैं एतद् करती हूँ/द्वारा घोषणा करता-कि मेरी जानकारी के अनुसार ,नामांकन प्रपत्र में दी गई सारी सूचनाएँ सत्य एवं प्रमाणिक हैं। मैं यह भी घोषित करता करती हूँ कि यदि नामांकन प्रपत्र एवं संलग्न दस्तावेजों में कोई सूचना गलत/असत्य पाई जाती है तो मेरे पाल्य का नामांकन, बिना कारण बताए, रद्द करने का अधिकार केन्द्रीय विद्यालय प्राधिकारी को प्राप्त है। मैंने केन्द्रीय विद्यालय में नामांकन से संबंधित सभी सूचनाओं का अध्ययन किया है एवं सभी शर्तों, नियमों एवं प्रक्रियाओं से सहमत हूँ। यदि विद्यालय द्वारा प्रवेश की पेशकश की जाती है तब प्रवेश के समय मूल दस्तावेज विद्यालय के समक्ष प्रस्तुत करने होंगे।

I hereby declare that I have read and understood the KVS admission guidelines 2023-24. All information provided by me in the registration form are true, complete and correct to the best of my knowledge and belief. I also declare that later if any documents or information being found invalid/untrue/incorrect, the admission of my ward will be cancelled by the Kendriya Vidyalaya Authority without assigning any reasons thereof and agree to abide by the rules, regulation and procedures of admission in Kendriya Vidyalaya. The original documents are required to be presented to the schools at the time of admission, if offered.

दिनांक /Date: _____

माता / अभिभावक का हस्ताक्षर / पिता /Signature of the Father / Mother / Guardian

पूरा नाम /Full Name : _____

संलग्न दस्तावेजों की सूची /List of Documents to be attached/ Check List (by Office only):

1.	Registration Form [as Annexure-A]	
2.	Date of Birth Certificate (Self Attested)	
3.	Photograph	
4.	Service certificate/Ex-Serviceman [as Annexure-B]/ Appointment Letter (if Govt. Servant)	
5.	Copy of recent pay slip / Appointment Order* and the front page of service book (if Govt. Servant) *** Must be Certified/Attested by DDO	
6.	Transfer Format by the competent authority [Annexure-C] (if Govt. Servant)	
7.	Proof of certificate in case of SC/ST/OBC (Non Creamy Layer)	
8.	EWS*/BPL* (with name of the Father)	
9.	PH / DA Certificate	
10.	Residence Proof with Self-declaration residence Format (RTE*)	
11.	ID Proofs/Aadhaar of Parents and Child* (*if any)	

AKNOWLEDGEMENT

S. No. _____ पंजीकरण संख्या / REGD NO. _____

I Received an application from Shri/Smt. _____
for registration of her /his son/daughter _____
for admission to class _____ .

तिथि/Date: _____ / 04 / 2024

Office / Admission I/c

Service Certificate (State Govt.)

Certified that Shri/Smt
(Designation) is working as **regular employee** in the office
/Department of He/She is a **regular employee**
of **State Govt. /State Govt. Autonomous Body/ Public Sector undertaking fully**
financed by Govt. and his/her services are **nontransferable/transferable** anywhere in
the State.

Complete address:
.....
.....

Telephone No. of office:

Signature of Head of the Office/DDO

Name:

Date: Designation:

Place: Contact No:.....

(Office Stamp)

Note*:

1. Please strike out whichever is not applicable before the signature of the Head of the Office / DDO.

Service Certificate (Central Govt.)

Certified that Shri/Smt
(Designation) is working as **regular employee** in the office
/Ministry of He/She is a **regular employee** of
**Defence/CRPF/BSF/NSG/SPG/CISF/Central Govt. /Central Govt. Autonomous
Body/ Public Sector undertaking fully financed by Govt.** and his/her services are
nontransferable/transferable anywhere in India.

Complete address:
.....
.....

Telephone No. of office:

Signature of Head of the Office/DDO

Name:

Date: Designation:

Place: Contact No:.....

(Office Stamp)

Note*:

- 2. Please strike out whichever is not applicable before the signature of the Head of the Office / DDO.

CERTIFICATE OF NUMBER OF TRANSFERS

I, (name) (Rank/ designation) is a **Permanent employee** of
 (complete office address). The Transfer details of the employee during the past 7 years (from 01.04.2017 onwards) as per the service records is furnished as under:

Note: An employee would be treated as transferred only if he/she has been transferred (during the past 7 years) by the competent authority from one place to another place which is at a distance of at least 20 kms and minimum period of stay at a place should be 6 months (180 days).

S. No.	Place of Posting (Transfer From)	Dates of Stay		Period of stay in Months	Transferred to: (Place)	Distance between two Places (KM)	Office Order No.
		From (dd-mm-yyyy)	To (dd-mm-yyyy)				
1							
2							
3							
4							
5							
6							
7							
8							
9							

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

Signature of Head of the Office/DDO

Name:

Date: Designation:

Place: Contact No:.....

(Office Stamp)

Note*: 1. Please strike out whichever is not applicable before the signature of the Head of the Office / DDO.

DISTANCE DECLARATION BY THE PARENT

I Father/Mother of

hereby declare that my son/daughter is residing in my own house/ rented house/ Guardian's residence as per the address mentioned below:

(Name & Complete Postal Address of Residence with Phone no./Mobile no.s)

.....
.....

The distance of the above residence is KM from Kendriya Vidyalaya Saharsa.

Date:

Signature of the parent

DISTANCE DECLARATION BY THE PARENT (for RTE* Applicants only)

I Father/Mother of

hereby declare that my son/daughter is residing in my own house/ rented house/ Guardian's residence as per the address mentioned below:

(Name & Complete Postal Address of Residence with Phone no./Mobile no.s)

.....
.....
.....

The distance of the above residence is KM from Kendriya Vidyalaya Saharsa. I am fully aware that the distance of 5 KM is a mandatory criterion for admission under RTE, therefore I state that If the information about the distance is found to be wrong/incorrect, I will not claim the right to admission under RTE.

Date:.....

Signature of the parent

SELF-DECLARATION FORMAT

I _____, Father / Mother of Master / Miss _____
_____ age _____ years, resident of _____
_____ (complete

address), do hereby declare that the information given in admission form of the admission in **Kendriya Vidyalaya Saharsa** 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 will be deemed cancelled and I will be liable to legal action as per guidelines of KVS and any benefit accrued to me or my ward shall be **summarily** cancelled.

Date: _____

Place: _____

Signature of the Parent / Guardian

Self-Declaration Format for Documents Submission

I _____, **Father/Mother/of Master/Miss** _____
age _____ years, resident of _____
(complete address) hereby declare that I will submit/verify all the following documents with **original at the time of admission.**

1. _____
2. _____
3. _____
4. _____
5. _____

If I will not be able submit/verify the documents with originals in due time/date, then the admission of my ward will be cancelled and will be liable for legal action as per the KVS admission and benefit accrued by me or my ward shall be summerly cancelled.

Date:

Place:

Signature of the Parent/Guardian