

ODISHA ADARSHA VIDYALAYA SANGATHAN

APPLICATION FORM FOR ADMISSION IN: CLASS XI (SCIENCE) SESSION 2021-22

Index No.

(For Official use only)

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(All information should be filled up in capital letters)

1. Name of the Student : _____

2. Name of the Mother : _____

3. Name of the Father : _____

4. Sex : Boy Girl

5. Caste : SC ST GEN/OBC (Put tick mark)

6. Blood Group: _____

7. If belong to following Categories :

(a) Person with Disability: Yes/No

(b) If yes, Category of disability: (HI/VI/OH)

8. Nationality : _____

9. Date of Birth (a) In figures DD MM YYYY

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(b) In words: _____

10. Mother Tongue : _____

11. i. Aadhar No. of the student: (UID/VID/EID) _____

ii. Aadhar No. of the Father/Guardian: (UID/VID/EID) _____

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

12. ACADEMIC DETAILS

- a. Name of the school last studied in Class X: _____
- b. Location of the School: Block: _____, Dist: _____
- c. Type of School:- Govt./Private _____
- d. Percentage of Marks obtained in Board Exam-2021: _____%
Division: _____
- e. Total mark secured in Board Exam-2021: ____ Full mark: _____
- f. Roll No of class X in Board Exam: ____ Year of passing: _____
- g. Name of the Board: _____ (CBSE / ICSE / BSE)

13. Whether the student is suffering from any Chronic/ serious disease.
(Yes/No)
If yes, state the nature of disease.

14. Contact No. of Parent (s) : _____ / Email Id. _____

15. (a) Present address with Pin Code :

(b) Permanent address with Pin Code :

16. Account Details:-
i. Name of the Bank: _____
ii. Account No. : _____
iii. IFSC Code : _____

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 ward may stand cancelled.
2. We do undertake that, our ward 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 student.

Signature of Mother/Father/Legal Guardian

Date. _____

Signature of the Candidate

Date. _____