

 <p>केन्द्रीय विद्यालय संगठन</p>	<p>केन्द्रीय विद्यालय.2, सम्बलपुर KENDRIYA VIDYALAYA NO 2, SAMBALPUR (Under Ministry of Education, Govt. of India) बुर्ला, संबलपुर – 768017 At/Post: Burla, Sambalpur-768017 Ph No.: 0663-2960438</p>	 
	<p>E-mail: kysambalpur2@gmail.com CBSE Affiliation No.: 1500057</p>	<p>Website: https://no2sambalpur.kvs.ac.in School Code : 19252 KV Code : 2315 Station Code : 804</p>

Date: 23/05/2023

ADMISSION NOTICE (CLASS – XI SCIENCE for session 2023-24)

Applications are invited from the NON-KV STUDENTS (from schools affiliated to CBSE/ICSE/State Boards/ NIOS etc.) against the following tentative vacancies for admission into Class XI Science (2023-24) in Kendriya Vidyalaya No 2 Sambalpur (Burla):

CLASS XI SCIENCE	Details
NO. OF VACANCIES AVAILABLE (TENTATIVE)	02
Registration for Admission Offline only	Date: 24 .05.2023 to 01.06.2023; Time: 9.00 am. upto 12.30 PM
Declaration of Selection List	Date : 05.06.2023
Admission	Date 06.06.2023 to 09.06.2023

The registration form and Option form will be available in the school office from 9.00 a.m. to 12.30 pm. Candidates can also download these forms on the Vidyalaya Website <https://no2sambalpur.kvs.ac.in> from dt. 24 /05/2023 onwards. **The last date of submission of Complete Registration form along with required documents to this office is 01.06.2023 upto 12.30 PM.** Admission will be granted as per the admission guidelines of KVS (HQ) New Delhi 2023-24.

NOTE: - Mere registration does not confer any right to admission into Class XI Science.

LIST OF THE DOCUMENTS TO BE SUBMITTED:

1. Filled in Registration form
2. Filled in Option Form (Subject Combination) *Annexure-I*
3. Copy of Mark sheet of Class X (Self Attested)
4. Migration Certificate (for State Board /ICSE / NIOS)
5. ADHAAR Card of the Child (if any) .
6. Address Proof (Voter Id / Bank Passbook / Gas Connection / Electricity Bill) in the name of the parents of the candidate or Residence Certificate issued by the competent authority in the name of the candidate.
7. Caste Certificate in case SC/ST/OBC-Non Creamy Layer category.
8. Copy of the Birth Certificate of the Child.
9. **In case of regular Govt. Employee** (Central / State Govt. / PSU / AB / IHL Employee)
 - a. Service Certificate along with the Details of Transfers(in the Proforma given in the Registration Form)
 - b. Certificate from the Employer (Please use the format given as Annexure- II)
 - c. Latest Pay Slip
 - d. Please attach a copy of regularization of service
10. A certificate of Retirement for uniformed Defence Employees (Ex-Service men)

(Please note: Original Transfer Certificate of the child (counter-signed by DEO in case of State / ICSE Board) will be required to be submitted at the time of admission, if selected)


PRINCIPAL
 प्राचार्य / Principal
 केन्द्रीय विद्यालय क्रमांक-2 - Kendriya Vidyalaya No.2
 सम्बलपुर -768017 / Sambalpur-768017



केन्द्रीय विद्यालय, नं. 2 संबलपुर (ओड़िशा)
KENDRIYA VIDYALAYA, NO.2 SAMBALPUR (ODISHA)

कार्यालय के लिए/
For Office Use

क्रम सं. /
Sl. No.

पंजीकरण क्रमांक
/ Registration No.

वर्ग / Category

पंजीकरण के लिए कक्षा / Registration for Class _____ Year _____

REGISTRATION FORM

Attach the Recent
Passport Size
Photo of the Child

N.B. : I. Incomplete registration form and wrong information will lead to rejection.

बच्चे की जानकारी / Details of Child

1. पहला नाम /First Name _____ मिडिल नाम /Middle Name _____ अंतिम नाम /उपनाम /Last Name/Surname _____

2. लिंग / Gender : M F Trans G

3. बच्चे की संबन्धित श्रेणी / The category to which child belongs

सामान्य	अनु. जाति	अनु. जनजाती	ओ.बी.सी.	आर्थिक कमजोर	बी.पि.एल.	विकलांग	इकलौती कन्या
General	SC	ST	OBC	EWS	BPL	Diff. Abled	SG Child
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

यदि बच्चा अनुसूचित जाति / अनुसूचित जनजाती / ओ.बी.सी. (अन्य पिछड़े वर्ग) / आर्थिक रूप से कमजोर / बी.पि.एल./ विकलांग / इकलौती कन्या श्रेणी से सम्बंधित है तो कृपया संबन्धित प्रमाण-पत्र संलग्न करें। If the child belongs to SC / ST / OBC / EWS / BPL / Disabled / S.G. Category then please attach relevant certificate.

4. विकलांगता श्रेणी / Disability Category _____
विकलांगता के प्रकार / Type of Disability _____
विकलांगता का प्रतिशत / Percentage of Disability _____
प्रमाणपत्र संख्या / Certificate No. _____
जारी करने की तारीख / Date of Issue _____
प्रमाण पत्र निर्गमन प्राधिकारी / Certification issuing Authority _____

प्रमाण पत्र बच्चे के नाम पर होना चाहिए / Certificate should be in the name of child only

5. जन्म तिथि (अंकों में) Date of Birth (in figure)
(शब्दों में) (In words) _____

बच्चे की आयु 31.03.20223 तक वर्ष/Years _____ मास/Months _____ दिन/Days
Age as on 31.03.20223

6. बच्चे का रक्त समूह (Rh पैक्टर सहित) / Blood Group of the child (with Rh factor) _____

P.T.O.

पारिवारिक विवरण /FAMILY DETAILS	माता /Mother	पिता /Father
एकल अभिभावक / Single parent		
शिर्षक / Title		
पहला नाम / First Name		
अंतिम नाम / उपनाम / Last Name / Surname		
राष्ट्रीयता / Nationality		
व्यवसाय / Occupation (Govt. Regular/Govt. Contractual / Private / Others)		
संस्था का नाम / Name of Organization		
पद / Designation		
ग्रड पे एवं वेतनमान / Pay scale with Grade Pay		
सकल वेतन (वार्षिक) / Gross Salary (annual)		
पदभार ग्रहण करने की तिथि / Date of Joining		
सेवानिवृत्ति की तिथि / Date of Super Annuation		
सेवा श्रेणी / Service Category (I / II / III / IV / V)		
घर का पता / Residential Address		
पता (जारी....) / Address (contd....)		
देश / Country		
राज्य / State		
जिला / District		
शहर एवं पिन कोड / City & Pin Code		
टेलीफोन नंबर / Telephone Number		
मोबाइल नंबर / Mobile Number		
ईमेल पता / E-mail Address		

	<i>Please enter Official Address details below if Mother is working</i>	<i>Please enter Official Details below. If Father/Guardian is working</i>
कार्यालय का पता / Official Address		
पता (जारी....) / Address (contd....)		
देश / Country		
राज्य / State		
जिला / District		
शहर एवं पिन कोड / City & Pin Code		
टेलीफोन नंबर / Telephone Number		
मोबाइल नंबर / Mobile Number		
कार्यालय का फैक्स नंबर / Office Fax no.		

सेवा प्रमाण-पत्र / SERVICE CERTIFICATE
(केन्द्रीय सरकार/Central Govt.)

प्रमाणित है की श्री/श्रीमती कार्यालय/मंत्रालय में नियमित कर्मचारी के रूप में कार्यरत है। वे रक्षा सेवा/ केन्द्रीय रिजर्व पुलिस बल / सीमा सुरक्षा बल / एन.एस.जी./एस.पी.जी./सी.आइ.एस.एफ./केन्द्रीय सरकार स्वायत्त संस्था अथवा सार्वजनिक क्षेत्र के उपक्रम, जो पूर्ण रूप या आंशिक रूप से केन्द्र सरकार से वित्त-पोषित है, के नियमित कर्मचारी हैं तथा उनकी सेवा अस्थानांतरणीय है / पूर्ण भारत में कहीं भी स्थानांतरणीय है।

Certified that Shri/Smt is working as regular employee in the Office / Ministry of He/She is an employee of Defence Service / CRPF / BSF / NSG / SPG / CISF / Central Govt. / Autonomous Body / Public Sector Undertaking fully financed / partially financed by Central Govt. and his / her services are non-transferable /transferable anywhere in India.

स्थान / Place _____

दिनांक / Date _____

कार्यालय का पूर्ण पता एवं दूरभाष संख्या _____
Complete address and Telephone No. of office _____

कार्यालय अध्यक्ष के हस्ताक्षर
(नाम, पद और कार्यालय की मोहर सहित)
Signature of Head of the Office
(with Name, Designation and Office Stamp)

सेवा प्रमाण-पत्र / SERVICE CERTIFICATE
(राज्य सरकार/State Govt.)

प्रमाणित है की श्री/श्रीमती कार्यालय/मंत्रालय में नियमित कर्मचारी के रूप में कार्यरत है तथा उनकी सेवा अस्थानांतरणीय है / पूर्ण राज्य में कहीं भी स्थानांतरणीय है।

Certified that Shri/Smt is working in the Office / Ministry of and his /her services are non-transferable/transferable anywhere is State.

स्थान / Place _____

दिनांक / Date _____

कार्यालय का पूर्ण पता एवं दूरभाष संख्या _____
Complete address and Telephone No. of office _____

कार्यालय अध्यक्ष के हस्ताक्षर
(नाम, पद और कार्यालय की मोहर सहित)
Signature of Head of the Office
(with Name, Designation and Office Stamp)

~~11311~~

DIED IN HARENES CERTIFICATE

प्रमाणित किया जाता है की कुमार/कुमारी स्वर्गीय श्री/श्रीमती के पुत्र/पुत्री हैं जो (कार्यालय/विभाग) में नियमित रूप से सेवारत थे/ थीं और उनका देहावसान सेवाकाल की अवधि में दिनांक को हुआ था।

Certified that master/Miss is the son/daughter of late Sri/ Smt. who was regular employee of (Office/Department) and he/she died in harness (while in service) on (date).

स्थान / Place _____

दिनांक / Date _____

कार्यालय का पूर्ण पता एवं दूरभाष संख्या _____
Complete address and Telephone No. of office _____

कार्यालय अध्यक्ष के हस्ताक्षर
(नाम, पद और कार्यालय की मोहर सहित)
Signature of Head of the Office
(with Name, Designation and Office Stamp)

स्थानांतरण विवरण / TRANSFER DETAILS

अभिभावक में माता अथवा पिता का चुनाव करे जिनकी सेवा श्रेणी एवं स्थानांतरण के आधार पर प्रवेश का निर्णय होगा।
Select parent whose Service Category and Transfers are to be considered for Admission

मैं, नाम (रैंक/पदनाम)..... कार्यालय, एतद द्वारा प्रमाणित करता/करती हूँ पिछले सात साल 31/03/
/ 2023) में एक स्थान से दूसरे स्थान पर मेरे (अंकों व शब्दों में) स्थानांतरण हुए जिनका विवरण नीचे दिया गया है।

I, (Name) (rank/designation) of
(office), do hereby certify that during the past 7 years (upto **31.03.2023** ..) I have been transferred
Times (in figures & in words) from one station to another, the details of which are given as under -

स्थान से Office/ Unit and Place	अवधि दिनांक से Date of joining the Office/Unit	अवधि दिनांक तक Date of release from the office/ Unit	ठहरने की अवधि Period of Stay (in months)	स्थान तक Transferred Office/ Unit and Place	दूरी (कि.मी.) Distance between the two Office (in km)	स्थानांतरण आदेश संख्या Transfer Order No.

मैं जानता/जानती हूँ कि यदि उपरोक्त तथ्य गलत पाए गए तो मेरा बच्चा केंद्रीय विद्यालय में प्रवेश के लिए अयोग्य हो जायेगा।
I know that if the above mentioned facts are found incorrect, my child will be disqualified for admission in Kendriya Vidyalaya.

स्थान / Place
दिनांक / Date

माता/पिता के हस्ताक्ष
Signature of parent

प्रतिहस्ताक्षर / COUNTER SIGNATURE

मैं (नाम) (रैंक/पदनाम)

..... (कार्यालय, एतद द्वारा प्रमाणित करता/करती हूँ कि उपरोक्त विषय विवरण को कार्यालय-
आलेखों से जाँच लिया गया है व सही पाया गया है।

I, (Name) (rank/designation) of (unit/
department) hereby certify that the particulars given in above have been authenticated by the records held in the office and found
correct.

स्थान / Place _____

दिनांक / Date _____

कार्यालय का पूर्ण पता एवं दूरभाष संख्या _____

Complete address and Telephone No. of office _____

कार्यालय अध्यक्ष के हस्ताक्षर
(नाम, पद और कार्यालय की मोहर सहित)
Signature of Head of the Office
(with Name, Designation and Office Stamp)

टिप्पणी / NOTE :- एक स्थान पर ठहरने की अवधि कम से कम छह मास होनी चाहिए। Minimum period of posting/stay at
a place should be minimum six months.

नियम एवं शर्तें /Terms & Conditions**अभिभावकों द्वारा वचनबंध /Undertaking by the parents**

1. मैं प्रमाणित करता हूँ कि मेरे द्वारा दी गई जानकारी सही है।

I certify that all the information provided is true to the best of my knowledge.

2. अगर मेरे बच्चे का नाम विद्यालय में नामांकन के लिए चयनित होता है, तो मैं प्रवेश के समय समस्त दस्तावेज की मूलप्रति प्रस्तुत करूंगा।

I shall submit all the required documents in support of the submissions, provided my ward is shortlisted for admission.

3. मैं इस शर्त से सहमत हूँ कि उपरोक्त तथ्य यदि गलत पाए जाते हैं, तो मेरा बच्चा/बच्चे केंद्रीय विद्यालय में प्रवेश हेतु अयोग्य होता/होगे।

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

मैं नियम व शर्तों के लिए सहमत हूँ

I agree to Term & Conditions

NOTE :- 1. Proof of residence shall have to be produced by all applicants.

* A self declaration from the parent for distance may also be accepted by furnishing and undertaking to this effect.

1. केन्द्रीय सरकार / Central Govt. 2. केन्द्रीय सरकार के स्वायत्त संस्थान / Autonomous bodies of Central Govt. 3. राज्य सरकार / State Govt. 4. राज्य सरकार के स्वायत्त संस्थान / Autonomous bodies of State Govt. 5. अन्य / Others.

मैं एतद् द्वारा यह प्रमाणित करता हूँ कि उपर्युक्त प्रविष्टियाँ मेरी जानकारी में सत्य है।
I certify that the above entries are true to the best of my knowledge.

माता / पिता / अभिभावक के हस्ताक्षर / Signature of Mother / Father / Guardian

दिनांक / Date

पुरा नाम / Full Name

Acknowledgement

S.No.

Session 2023-24

Registration No. XI/...../KV2SBP/23-24

Received an Application from Shri/ Smt.....for
 registration of her/ his son / daughterfor admission to
 Class- XI.

Date: .../.../2023

Principal
 KV No.2 Sambalpur

KENDRIYA VIDYALAYA NO.2 SAMBALPUR (BURLA) (ANNEXURE-I)
OPTION FORM (SUBJECT COMBINATION) FOR ADMISSION TO CLASS XI

SESSION: 2023-24

Please paste
a passport
size photo
here

1. Name of the student _____
2. Date of Birth _____
3. Mother's Name:- _____
4. Father's Name _____
5. Occupation of Parents and category (Central Govt./Central Govt. PSU, Autonomous, IHL/State Govt./State Govt. PSU, Autonomous, IHL/ Other)

Father	
Mother	

7. Income Details: **Father's** Basic Pay Grade Pay or Level
- Mother's** Basic Pay Grade Pay or Level

- 8 a) Address for Correspondence _____
- (b) Telephone No./Mobile (O) _____ (R) _____

9. Whether belongs to SC/ST/OBC (Non-Creamy)/Differently Abled/SGC
_____ (Enclose self- attested copy of certificate from competent authority)

10. (a) Name of Examination last passed & year _____
- (b) Name of Examining Board _____
- (c) Name & Address of the School last attended _____
- (d) Whether it was Kendriya Vidyalaya/ Recognized school/Unrecognized school _____

11. (a) **Details of Marks obtained in Board Examination**

Attach self attested copy of marks sheet.

English 100	Hindi/Sanskrit 100	Maths 100	Science 100	So. Science 100	Total 500	Percentage

- (b) Total of Marks in Maths & Science taken together _____
- (c) Participation Certificate in SGFI/ KVS National/ Regional/ NCC/ Sc& Guide/Adventure Activities
_____ (Enclose self- attested copy of certificate from competent authority)

12. Academic subject combinations available.

Group	English-core	Physics	Chemistry	Maths	Biology
Group-A	English-core	Physics	Chemistry	Maths	Biology
Group-B	English-core	Physics	Chemistry	Biology	Hindi-core
Group-C	English-core	Physics	Chemistry	Maths	Comp. Sc.
Group-D	English-core	Physics	Chemistry	Maths	Hindi core

13. Subject combination for which admission is requested (Give preference, Gr-A/Gr.B/Gr.C/ Gr.D)

First Preference _____ Second Preference _____

I undertake that the options given above are final. I will not request for any change later on.

Signature of student _____ Signature of parent with Date _____

Note

1. Concession of marks will Be allowed to participants of sports/Games/ Scout-Guides/Adventure activities and SC/ST candidates as per KVS rules. 2. Mere submission of Option Form will not confer any right of admission. Admission will be granted as per KVS Rules.

REMARKS BY I/C Admission: I have verified the details of Ma./ Miss. _____ and he/she is eligible for Science stream with subjects 1. English, 2) Physics 3) Chemistry 4) _____ 5) _____
Group allowed _____

I/C Admission

Principal

CERTIFICATE FROM THE EMPLOYER

(Regarding Status of Employment & identification of Admission Category in KVS)

I Sri/Smt./Ms. _____ (Name of the Employer) ,
 designation _____ working in the office of
 _____ department of _____ , government of
 _____ do hereby **Attach the Regularisation Letter** in respect of Sri/Smt./Ms.
 _____ (Employee) whose son/daughter
 _____ (Name of the Child) is seeking admission in Kendriya
 Vidyalaya _____

01	Name of the Child for whom admission is sought (in Block Letters)	
02	Class in which admission is sought	
03	Full name of the employee (in Block Letters)	
04	Designation of the employee	
05	Employee Code / Employee Identity No.	
06	Name of the office where the employee is presently posted	
07	Status of Employment (Whether Permanent/ Regular/ Temporary/Contractual/ Part Time/ Adhoc/Daily Wage Basis/Casual -To be written clearly)	
07.1	Date of Regularisation of Service of Employee (Attach the Letter)	
08	This office/organization is Central Government/Central Government Autonomous body/PSU fully or partially financed by Govt. of India/State Government/ Safe Government Autonomous Body/ PSU fully or partially Date of Regul finance by the state govt. (To be written clearly)	
09	Whether the employee is to be considered as an employee of Central Government/ <i>Central Government Autonomous body</i> /PSU fully or partially financed by Govt. of India/State Government/ Sate Government Autonomous Body/ PSU fully or partially finance by the state govt. (Any one of the above to be written clearly)	
10	Please write any one of the following which is applicable I.r.o. the child for whom admission is sought 1. Children of transferable and non-transferable Central government employees and children of ex- servicemen. This will also include children of Foreign National officials, who come on deputation or transfer to India on invitation by Govt. of India. 2. Children of transferable and non-transferable employees of Autonomous Bodies / Public Sector Undertaking/Institute of Higher Learning of the Government of India. 3. Children of transferable and non-transferable State Government employees. 4. Children of transferable and non-transferable employees of Autonomous Bodies/ Public Sector Undertakings/Institute of Higher Learning of the State Governments. 5. Children from any other category	
11	Recent Pay/Salary of the Employee with proper Split up	(i) Pay Level : _____ (ii) Pay : _____ (iii) DA : _____ (iv) HRA : _____ (v) Any Other _____ (vi) Any Other : _____ (vii) Total :
12	Whether the employee is drawing the consolidated pay	YES / NO

Place: _____
 Date: _____

Signature of the Certifying Authority with Seal

Complete Address of the Office:

Telephone Number: _____