

1

GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI  
DIRECTORATE OF EDUCATION: SCHOOL BRANCH  
OLD SECRETARIAT DELHI-110054

No.DE.23(32)/Sch.Br./2016/ 347

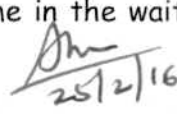
Dated: 26/2/16

CIRCULAR

Guidelines for Admission in Pre-primary/ Class-I in Sarvodaya Vidyalayas (for Parents)

1. Application forms for admission to Pre-primary (K.G.) and Class-I whichever is the entry level class in Government Sarvodaya Vidyalayas of the Directorate of Education, Govt. of NCT of Delhi can be obtained from the concerned Sarvodaya Vidyalayas from 01.03.2016 (Tuesday ) to 15.03.2016 (Tuesday) (both days inclusive) on all working days. Forms can also be downloaded from the Department's website [www.edudel.nic.in](http://www.edudel.nic.in).
2. Application forms, complete in all respect, will be received in the morning shift schools from 8.30 AM to 10.30 AM and in the evening shift schools from 2.30 PM to 4.30 PM from 01.03.2016 (Tuesday) to 15.03.2016 (Tuesday) (both days inclusive) on all working days. Children residing in the vicinity of the school (if a Sarvodaya Vidyalaya is not available in the vicinity, then residents within a radius of 3 k.m. of the schools) shall be eligible to apply.
3. The following documents are required to be produced by the parent/ guardian at the time of Admission:-
  - a. (i) Original Date of Birth Certificate issued by MCD or Any other local body or
  - (ii) Anganwadi record. or
  - (iii) Hospital/Auxiliary Nurse and Midwife(ANM) register record or
  - (iv) An Undertaking by the Parents regarding Date of Birth as per Part-B of the Application Form
- c. One passport size photograph of the child.
4. Selection of candidates will be done by draw of lots which will be held at 11.00 AM in the morning shift schools and 3.00 PM in the evening shift schools on 21.03.2016 (Monday) in the presence of parents/guardians.

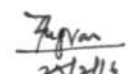
- 2.
5. Applications of only those children will be considered for admission who have completed four years of age as on 31.03.2016 for Pre-primary(child must be born between 01.04.2011 to 31.03.2012) and who have attained the age of five years as on 31.03.2016 for Class-I (child must be born between 01.04.2010 to 31.03.2011).
  6. The list of children selected through the draw of lots will be displayed on the School Notice Board on 25.03.2016 (Friday) at 11.00 A.M. and admissions will be done from 26.03.2016 (Saturday) to 31.03.2016 (Thursday) on submission of requisite documents .
  7. In case of selected children the immunization certificate is to be submitted by the parents/guardians within 6 months from the date of admission.
  8. Primary Classes will commence from 2<sup>nd</sup> April, 2016 (Monday) and Pre-primary from 4<sup>th</sup> April 2016 (Wednesday)
  9. Reservation of seats will be as follows:-
    - a. 15% seats for Scheduled Caste candidates.
    - b. 7.5% seats for Scheduled Tribe candidates.
    - c. 3% seats for physically handicapped ( to be duly certified by a Govt. Hospital )
    - d. 2% for the wards for the employees of the Directorate of Education (1% for the wards of Ministerial staff and 1% for teacher's wards).
  10. In the case of non-availability of candidates in the reserved categories, the vacant seats be given to the unreserved candidates as per the order of name in the waiting list.

  
25/2/16  
(Dr.(Mrs.) Sunita Kaushik)  
Addl. D.E. (School)

All HOSs of Sarvodaya Vidyalaya of DOE through DEL-E

Copy to:-

1. PS to Secretary (Education)
2. PS to Director (Education)
3. All Regional Directors
4. All DDEs (Distt)/EOs/ DEOs
5. Incharge, Computer Cell to paste on website
6. Guard File

  
25/2/16  
(Tapeshwar)  
D.E.O.(School)

प्रवेश आवेदन पत्र (सभी सरकारी/मान्यता प्राप्त सरकारी विद्यालय)  
शिक्षा निदेशालय,  
राष्ट्रीय राजधानी क्षेत्र दिल्ली सरकार  
सत्र 2016-17 के लिए  
APPLICATION FORM FOR ADMISSION IN GOVT./GOVT. AIDED SCHOOL  
DIRECTORATE OF EDUCATION: GOVT. OF NCT OF DELHI.  
(FOR THE SESSION 2016-17)

विद्यालय का नाम

NAME OF THE SCHOOL \_\_\_\_\_

(TO BE FILLED IN CAPITAL LETTERS)

PART A/भाग - क

- 1 छात्र / छात्रा का नाम  
NAME OF THE STUDENT: \_\_\_\_\_
- 2 लिंग पुरुष /महिला/उभयलिंग  
GENDER: MALE/FEMALE/TRANSGENDER
- 3 जन्मतिथि: अंग्रेजी सन के अनुसार  
DATE OF BIRTH: IN FIGURES (अंको में) \_\_\_\_\_  
IN WORDS (शब्दों में) \_\_\_\_\_
- 4 कक्षा  
CLASS: \_\_\_\_\_
- 5 आधार संख्या  
AADHAR NO. \_\_\_\_\_
- 6 (i) बैंक का नाम  
NAME OF BANK: \_\_\_\_\_  
(ii) खाता संख्या (छात्र/संयुक्त खाता माता के साथ)  
ACCOUNT NO IN THE NAME OF STUDENT/JOINT A/C WITH MOTHER \_\_\_\_\_  
(iii) बैंक का आई एफ एस कोड  
IFS CODE OF BANK: \_\_\_\_\_
- 7 रक्त वर्ग  
BLOOD GROUP: \_\_\_\_\_
- 8 माता का नाम  
MOTHER'S NAME: \_\_\_\_\_
- 9 पिता का नाम  
FATHER'S NAME: \_\_\_\_\_
- 10 अभिभावक का नाम  
GUARDIAN'S NAME: \_\_\_\_\_
- 11 अनुसूचित जाति/अ ज जाति/अ पि व/सा.  
SC/ST/OBC/GEN. \_\_\_\_\_
- 12 धर्म  
RELIGION: \_\_\_\_\_
- 13 व्यवसाय पिता/माता  
OCCUPATION OF FATHER: \_\_\_\_\_ MOTHER: \_\_\_\_\_
- 14 सभी स्रोतों से परिवार की वार्षिक आय  
ANNUAL INCOME OF FAMILY (FROM ALL SOURCES): \_\_\_\_\_
- 15 घर का पता  
RESIDENTIAL ADDRESS: \_\_\_\_\_
- 16 दूरभाष माता \_\_\_\_\_ पिता \_\_\_\_\_  
TELEPHONE NO. MOTHER: \_\_\_\_\_ FATHER \_\_\_\_\_
- 17 तृतीय भाषा  
Third language \_\_\_\_\_  
(Subject to availability)
- 18 जन्म प्रमाण पत्र का विवरण (निम्न लिखित में से कौन सा संलग्न है, कृपया ✓ लगाएँ)  
DETAILS OF DATE OF BIRTH CERTIFICATE (PLEASE ✓ WHICH ONE OF THE FOLLOWING IS ATTACHED)  
A) स्थानीय निकाय द्वारा जारी किया गया जन्म प्रमाण पत्र  
BIRTH CERTIFICATE ISSUED BY LOCAL BODY   
B) अस्पताल/नर्स के रजिस्टर का रिकार्ड  
HOSPITAL/AUXILIARY NURSE AND MIDWIFE (ANM) REGISTER RECORD

PASTE HERE  
A PASSPORT  
SIZE PHOTO  
OF THE  
CHILD  
बच्चे का  
पासपोर्ट आकार  
का फोटो  
चिपकाए

C) आगनवाडी रिकार्ड  
ANGANWADI RECORD

D) जन्मतिथि के संदर्भ में अभिभावक द्वारा घोषणा पत्र  
DECLARATION OF THE AGE OF THE CHILD BY THE PARENT OR GUARDIAN.

**भाग – ख Part-B**  
**घोषणा पत्र /Undertaking**

I, **Shri./Smt.** \_\_\_\_\_ **Father/Mother/Guardian** of \_\_\_\_\_ do hereby certify that the actual Date of Birth of my ward \_\_\_\_\_ is (in figures) \_\_\_\_\_ (in words) \_\_\_\_\_ to the best of my knowledge and I shall not apply for change of Date of Birth in future.

मैं श्री/श्रीमती ..... शपथ पूर्वक घोषणा करता हूँ कि मेरी जानकारी के अनुसार मेरी संतान की जन्मतिथि (अंको मे) ..... (शब्दो में) ..... हैं। मैं भविष्य में उसकी जन्मतिथि परिवर्तन के लिए कोई प्रार्थना नहीं दूँगा/दूँगी ।

\*जिस माध्यम में पढ़ना चाहते हैं \_\_\_\_\_  
\*PREFERED MEDIUM OF INSTRUCTION \_\_\_\_\_

\*नोट- माध्यम की चयनता विद्यालय में उपलब्धता के आधार पर विद्यालय प्रमुख द्वारा निश्चित होगी।  
\*Note- Subject to the availability in the school and discretion of the HOS.

दिनांक \_\_\_\_\_  
Dated \_\_\_\_\_

माता/पिता/अभिभावक के हस्ताक्षर  
Parents/Guardian's Signature

=====

**भाग – ग/Part-C**  
(विद्यार्थी का विद्यालय में प्रवेश के बाद विद्यालय द्वारा भरा जाएगा)  
( To be filled in by the school after admission of the student)

- 1 प्रवेश संख्या  
Admission Number : \_\_\_\_\_
- 2 दाखिले की तारीख  
Date of Admission : \_\_\_\_\_
- 3 कक्षा  
Class : \_\_\_\_\_
- 4 भाग  
Section : \_\_\_\_\_

विद्यालय प्रमुख के हस्ताक्षर  
Signature of HOS

दाखिला इन्चार्ज के हस्ताक्षर  
Signature of Admission In-charge

भाग - घ /Part-D

प्राप्ति रसीद/Acknowledgement Receipt

(दाखिला आवेदन पत्र प्राप्त करते समय विद्यालय द्वारा अभिभावक को जारी करने हेतु)

(To be issued by the School to the Parents at the time of receiving the application form)

Received the application form of .....ward of  
Shri/Smt. .... for Admission to class .....  
His/Her application number is .....

कुमार / कुमारी..... संतान श्री/श्रीमती .....का  
कक्षा ..... आवेदन पत्र प्राप्त हुआ।

Signature of the Teacher Incharge  
अध्यापक इन्चार्ज के हस्ताक्षर

NAME OF THE TEACHER अध्यापक का नाम.....

NAME OF THE SCHOOL विद्यालय का नाम.....

SCHOOL ID विद्यालय आईडी. ....

DATE दिनांक.....

STAMP OF THE SCHOOL विद्यालय की मोहर.....