Annexure – VII

Common Application Form for Admission under Economical Weaker Section (EWS) & Disadvantage Group Category (DG) (under RTE Act 2009)
For the Session 2016-17
(To be filled in Block Letters)

Registration Number
(To be filled by the school)

1. Name of the School:
(With address)

2. Class: Nursery/Pre-School   KG/Pre-Primary   Class I

3. Name of the Child:

4. Category under which Applied:
(Please Tick whichever is applicable)
   (a) Economically Weaker Section (EWS)
   (b) Disadvantaged Group (DG)

5. Category if Disadvantaged Group (DG):
(Please Tick whichever is applicable)
   SC
   ST
   OBC (Non Creamy Layer)
   Orphan
   Transgender
   Child With Special Needs/Disabled
   Child With Special Needs/Disabled (Mentally Challenged)

6. Gender:
   Male   Female   Transgender

7. Date of Birth*:
   Day   Month   Year

8. Age as on 31.03.2016 (In words):

9. Mother’s Name:

10. Father’s Name:

11. Guardian’s Name (If applicable):

12. Profession of Parents/Guardian:
   (a) Mother:
   (b) Father:
   (c) Guardian:

13. Present Residential Address**: 
14. Mobile No. of the Parents/Guardian: __________________________

15. Email address, if any: _________________________________________

16. Aadhar No. of the Child, if any: ________________________________

17. Aadhar No. of the Mother, if any: _______________________________

18. Aadhar No. of the Father, if any: _________________________________

19. Aadhar No. of the Guardian, if any: ______________________________

20. Total Annual Income of both the parents from all sources: ________

   (Income Certificate not required for Disadvantaged Group Category)

22. Income Certificate No. (if issued)/ Receipt No. (if applied but not issued): ________________________

23. Income Certificate Date (if issued)/ Date of Receipt (if applied but not issued): ______________________

24. Proof of Disadvantaged Group***: ________________________________

25. Disadvantaged Group Certificate No. (if issued)/ Receipt No (if applied but not issued): ________________

26. Disadvantaged Group Certificate Date (if issued)/ Date of Receipt (if applied but not issued): __________

Declaration by the Parents/Guardian

I __________________________________________ (Name) Mother/Father/Guardian of __________________________ (Name of the Child) hereby declare that the information given above is true and correct to the best of my knowledge and belief. I have read and understood all the provisions of the notification in this regard. In case any information is found false or incorrect on verification, the admission of my ward may be cancelled and I will be liable for the action to be taken against me as per law.

Dated: ____________________________

Signature of the Parents/Guardian
Submit any one of the following documents as proof:

*Proof of Date of Birth:-*
(1) Birth certificate under the Birth, Death and Marriage Certificate Act, 1986.
(2) Hospital/Auxiliary Nurse and Midwife (ANM) register record.
(3) Anganwadi Record.
(4) Declaration of age of the child by the parents or guardian.

**Proof of Present Residential Address:-**
(1) Ration card in the name of Parents having name of the Child in Ration card.
(2) Domicile certificate of child or his/her parents.
(3) Voter I card of any of the parents.
(4) Electricity Bill/MTNL telephone bill/Water bill.
(5) Unique Identity Card (Aadhar) of Mother/Father/Child issued by Govt. of India.
(6) Passport in the name of any of the parents or child.

***Proof of Economically Weaker Section (EWS) :-***
(1) Income certificate issued by a Revenue Officer not below the rank of Tehsildar.
(2) BPL Ration Card (Yellow coloured)
(3) AAY Ration Card (Pink coloured)
(4) Food Security card issued by Food & supply Dept.(GNCT of Delhi).

****Proof of DG :-**
(1) Caste Certificate issued by Revenue Dept. GNCT Delhi (DC Office) in respect of SC/ST/OBC (Non Creamy Layer) of Child/Parents.
(2) Medical Certificate issued by Govt. Hospital in respect of child with Special Needs/Disabled.
(3) Documentary evidence for Orphan.
(4) Documentary evidence for Transgender.

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