



Govt. of Jharkhand

Department of School Education and Literacy (Jharkhand Education Project Council) Admission Form for Admission in CM School of Excellence Session: 2025-26

NAME OF THE SCHOOL APPLYIN	NG FOR:	Photo
DISTRICT:	BLOCK:	
NAME OF THE STUDENT	:	
GENDER	: BOY/GIRL/TRANSGENDER	
DATE OF BIRTH: IN FIGURE	RES	
	DS	
CLASS (to which Admission is sough	nt)Stream (in case of class-XI)	
NAME OF THE SCHOOL & CLASS	S LAST ATTENDED AND NAME OF THE BOARD OF EXAM	INATION: (for
class II and above)		
AADHAR No		
STUDENT PEN No		
STUDENT APAAR ID		
MOTHER'S NAME:		
FATHER'S NAME:		
GUARDIAN'S NAME:		
OCCUPTATION OF FATHER:	MOTHER:	
ANNUAL INCOME OF FAMILY (F	ROM ALL SOURCES):	
RESIDENTIAL ADDRESS:		
DISTRICT:BLC		
PANCHAYAT / MUNICIPAL:		
	CASTE: (SC/ST/BC-I/ BC-II/EWS/GEN)	
	FATHER	
ALTERNATIVE MOBILE NO. (IF A	ANY)	
TYPE OF DISABILITY (IF ANY) _		
LIST OF DOCUMENTS ATTACHE	D	
1. FOR DATE OF BIRTH:		
2. FOR RESIDENCE PROOF:		
 CASTE CERTIFICATE (IN ANY OTHER (IF ANY): _ 	I CASE OF SC/ST/BC-I/ BC-II/EWS):	

<u>Part –B</u> <u>Undertaking</u>

	Father/Mother/Guardian of hereby, declare, that the details provided by me in the
application form are complete, accura	te and true to the best of my knowledge and based on records.
	Birth of my ward
	(in words)
and I shall not apply for change of Da	ate of birth in future.
Dated	Parents/ Guardian's Signature
	भाग—ख
	घोषणा पत्र
मैं श्री / श्रीमती	माता / पिता / अभिभावकका,
•	में मेरे द्वारा किए गये सभी प्रविष्टियाँ मेरी जानकारी और अभिलेखों
के अनुसार पूर्ण और सत्य हैं। साथ ही,	मैं प्रमाणित करता / करती हूँ कि मेरे बच्चे की जन्म तिथि (अंको में) हैं।
	के लिए आवेदन नहीं दूँगा / दूँगी।
दिनांक:	माता / पिता / अभिभावक के हस्ताक्षर