

13. Whether the school is a Govt./Aided . (Yes/No)
Whether recognized school and has got CoR from the Govt. of Odisha.(Yes/No).
If yes annex a photocopy of CoR duly attested by the Principal/ Headmaster.

Signature of the Principal/Headmaster
Office Seal

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

15. (a) Present address with Pin Code :

- (b) Permanent address with Pin Code :

16. Study Certificate from the Head of the Institution :
Certified that Shri/Kum. _____ S/D
of _____ is Abonafied student of Class-Vth of
this institution. His/ Her date of Birth is _____ and
Admission No. _____ Date. _____ as
per Admission Register. The data furnished are correct to the best of
my knowledge.

**Seal and Signature of
Head of Institution**

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 child may stand cancelled.
2. We do undertake that, our child and we shall abide by the rules and regulations laid down by Odisha AdarshaVidyalayaSangathan (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 Child.

Signature of the Mother

Date. _____

Signature of the Father

Date. _____

Name & Signature of the Legal Guardian with date (if parent(s) not alive)