



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 APPLYING FOR: Photo
DISTRICT:BLOCK:
NAME OF THE STUDENT :
GENDER : BOY/GIRL/TRANSGENDER
DATE OF BIRTH: IN FIGURES
IN WORDS
CLASS (to which Admission is sought)Stream (in case of class-XI)
NAME OF THE SCHOOL & CLASS LAST ATTENDED AND NAME OF THE BOARD OF EXAMINATION: (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 (FROM ALL SOURCES):
RESIDENTIAL ADDRESS:
DISTRICT:BLOCK:
PANCHAYAT / MUNICIPAL:
VILLAGE/ WARD
BLOOD GROUP:CASTE: (SC/ST/BC-I/ BC-II/EWS/GEN)
RELIGION:
MOBILE NO. (MOTHER)FATHER
ALTERNATIVE MOBILE NO. (IF ANY)
TYPE OF DISABILITY (IF ANY)
LIST OF DOCUMENTS ATTACHED
1. FOR DATE OF BIRTH:
2. FOR RESIDENCE PROOF:
 CASTE CERTIFICATE (IN CASE OF SC/ST/BC-I/ BC-II/EWS): ANY OTHER (IF ANY):

<u>Part –B</u> <u>Undertaking</u>

I, Shri. / Smt	Father/Mother/Guardian of	
1 - ×	hereby, declare,	that the details provided by me in the
application form are complete	, accurate and true to the bes	st of my knowledge and based on records.
I, also certify that the actual D	ate of Birth of my ward	
and I shall not apply for change	ge of Date of Birth in future	
Dated		Parents/ Guardian's Signature
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	घोषणा पत्र	
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घोषणा करता / करती हैं कि आवे	दन पत्र में मेरे द्वारा किए गये	सभी प्रविष्टियाँ मेरी जानकारी और अभिलेखों
		ती हूँ कि मेरे बच्चे की जन्म तिथि (अंको में)
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दिनांक:		माता / पिता / अभिभावक के हस्ताक्षर