

Registration Number (To be filled by office)

EWS/DG/2017-18/.....



# **RING MIDWAYS SR.SEC. PUBLIC SCHOOL**

**(RECOGNISED & AFFILIATED TO C.B.S.E)**

Vipin Garden, Main Najafgarh Road, Near Dwarka Metro Station

New Delhi-110059 PH. 011-65196162, 65696162

School mail ID: ringmidwaysschool@mail.com

Common Application Form for the Admission under EWS & Disadvantaged Group  
Category (RTE Act 2009) For the Session 2018-19.

**(Please Tick whichever is applicable)**

A) Economically Weaker Section ☐

B) \* Disadvantaged Group ☐

Photograph

Photo

1 Class: Pre- Primary (**KG**)/ 1<sup>ST</sup> Class / 2<sup>ND</sup> Class/ 3<sup>rd</sup> Class ☐

**(Use only Capital Latter)**

2 Name of the Child: \_\_\_\_\_

3 \* Category if Disadvantaged Group: SC ☐ ST ☐ OBC( **Non Creamy Layer**) ☐

Child with special Needs/ Disable/Disable (Mentally Challenged) ☐

4 Gender: Male ☐ Female ☐ Transgender ☐

5 Date of Birth : Day  Month  Year

6 Age as on **31.03.2017** : \_\_\_\_\_  
(In words)

7 Mother's / Guardian's Name : \_\_\_\_\_

8 Father's/ Guardian's Name : \_\_\_\_\_

9 Profession of Parents / Guardian : \_\_\_\_\_

(a) Mother / Guardian : \_\_\_\_\_

(b) Father/ Guardian : \_\_\_\_\_

10 Present Residential Address\*\* : \_\_\_\_\_

11 Phone /Mobile No. of the parent/ Guardian :

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12 Email address if any : \_\_\_\_\_

13 Aadhar No. of the Child, : \_\_\_\_\_

14 Aadhar No. of the Mother : \_\_\_\_\_

15 Aadhar No. of the Father : \_\_\_\_\_

16 Aadhar No. of the Guardian : \_\_\_\_\_

17 Total Annual Income of both the parents from all sources:- \_\_\_\_\_

18 **Proof of Income For EWS Only\*\*\*** \_\_\_\_\_

- **(Income Certificate not required for (Disadvantaged Group Category)**

19 Income Certificate No. (if issued)/ Receipt No.(if applied but not issued) \_\_\_\_\_

20 Income Certificate Date(if issued)/ Date of Receipt( if applied but not issued: \_\_\_\_\_

21 Proof of Disadvantaged Group \*\*\*\* \_\_\_\_\_

22 Disadvantaged Group Certificate No.( if issued/ Receipt No (if applied but not issued): \_\_\_\_\_

23 Disadvantaged Group Certificate Date( if issued/Date of Receipt(if applied but not issued): \_\_\_\_\_

**Declaration by the parents**

I \_\_\_\_\_ (Name) Father/ Mother/ 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.

Signature of Parent/ Guardian

Dated: \_\_\_\_\_

Verified by \_\_\_\_\_

➤ **Submit any one of the following document as proof:**

- **Proof of Date of Birth:-**

- 1 Birth certificate under the Birth, Death and Marriages Certification Act, 1986.
- 2 Hospital / Auxiliary Nurse and Midwife (ANM) register record.
- 3 Anganwadi Record.
- 4 Declaration of age of the child by the parent of guardian.

- **Proof of Present Residential Address:**

- 1 Ration card in name of Parents of 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 (DG 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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Application of ..... (Name of the child) S/o , D/o.....

Received on ..... (Date).

Registration No.

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Weeker Section

B)

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