

ORIGINAL
APPLICATION FOR ADMISSION - CLASS VI, IX

(Boys only are eligible)
SAINIK SCHOOL, KAZHAKOOTAM
(For office use only)

No : For Class:

Roll No :

Centre :

Medium : English/Malayalam

Category : SC/ST/DEF/GC

Paste one copy of recent passport size of 3 X 5 cm of the Student duly attested by the Headmaster of the school last attended/gazetted Officer

(To be filled by parent in Block letters only as per the instructions given in the prospectus)

1. Name of the boy in full :
2. Date of birth : Date Month Year
(according to Christian era)
3. Class to which admission is sought :
4. State of Domicile :
5. a. Name of the father (indicate whether alive) :
- b. Name of the mother (indicate whether alive) :
- c. Name of the Guardian (if parents are not alive) :
6. Occupation & Monthly income of parents/guardian :

Relationship	Occupation	MONTHLY INCOME					
		Property	Business	Agriculture	Salary	Others	Total
Father							
Mother							
Guardian							
Total							

Community

Category

7. Whether belongs to **SC/ST** : Yes/No
(if yes, attach community certificate)

8. Address of the Parent /Guardian **(Please include Telephone Numbers also)**

Official/Correspondence Address	Permanent Address

9. Centre for Entrance Examination (in order of preference)
 - a)
 - b)
 - c)

10. Medium for Entrance Examination : ENGLISH / MALAYALAM
11. Class & School now studying :
12. Languages studied up to V std : a. Can read, write & speak
b. Can Speak only
13. Are you prepared to send your son to any other Sainik School other than Sainik school Kazhakootam, if allotted YES/NO
a.....
If Yes, name the schools in order of preference b.....
c.....

14. Details of Father/Mother (if serving in Defence Forces-Army/Navy/Air Force)

Latest Rank	Personal No	Unit	Date of Enrolment	OC Unit/Present Address

15. Details of Father/Mother (Ex-servicemen)

Last Rank held	No.	Unit	Date of Enrolment	Date of Discharge	Discharge Cert. No	Record Office

16. Have you ever applied for Entrance Examination to any Sainik School earlier ? If so give details YES/NO

Name of Sainik School	Year	Roll No.	Remarks

17. I solemnly declare that the particulars given above are true and no information required to be given has been concealed. In the event of any of the above information having been found incorrect at any time, I undertake to return the full amount of scholarship immediately on demand and without demur and will have no objection to my above named son / ward being immediately removed from the roll of the school. I also undertake not to seek inter school transfer for my son/ward later on.

Place
Date:

Signature of the Parent/Guardian

***Application is not transferable and is to be used only for the candidate for whom it is purchased.
Application in duplicate must be accompanied by following.***

- Proof of Class & Date of Birth Certificate issued by Registrar of births and death duly attested by the Principal / Headmaster of the School where the applicant is studying.
- Community Certificate in original (in respect of SC/ST candidates)
- In respect of Serving Defence Personnel, a service certificate from the OC of the unit where the parent is serving.
- In respect of Ex-servicemen, copy of discharge certificate (Preferably Photostat copy) duly attested by a Gazetted Officer
- Domicile certificate from the authority concerned.
- Two self addressed envelopes duly stamped with Rs.22 each of size 23 x 10 cm
- Identification Certificate and Hall Ticket duly completed.
- Give your Postal address in the attached perforated sheets. (Four numbers) which will be used for sending communication from the school to the Parent.

DUPLICATE
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Relationship	Occupation	MONTHLY INCOME					
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Mother							
Guardian							
Total							

Community

Category

- Whether belongs to **SC/ST** : Yes/No
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- Address of the Parent /Guardian (Please include Telephone Numbers also)

Official/Correspondence Address	Permanent Address

- Centre for Entrance Examination (in order of preference) a)
b)
c)

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**SAINIK SCHOOL, KAZHAKOOTAM
HALL TICKET**

(For Office Use Only)

No

1. **Roll No..... KT Date of Examination.....Time.....**
Centre.....

(To be filled by the Parent)

3. Class Medium.....

4. Name of the Candidate

5. Address

Sl.No.	Centre	Conducting School
a.	Kozhikode,	G.V.H.S.S. for Girls Nadakavu, Kozhikode-11
b.	Ernakulam,	Govt. HSS for Girls, Ernakulam, Cochin 16
c.	Kottayam,	Govt. H.S. School, Karapuzha, Kottayam-3
d.	Kazhakootam	Sainik School, Kazhakootam, Thiruvananthapuram

(Seal)

PRINCIPAL

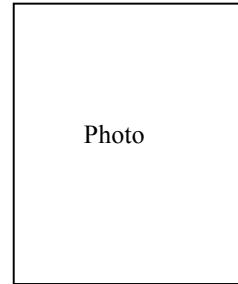
INSTRUCTIONS TO CANDIDATES

1. He is required to produce this letter before the Officer-in-Charge of the Centre at the time of examination
2. The Examination will be conducted from 0800 hrs. onwards in the morning and afternoon sessions
3. He is to report to the Examination Centre by 0745 hrs.
4. He should bring his own writing materials. Answer sheets will be provided. Blue/Blue black ink or blue ball pen will be used for answering question paper. Pencils will not be used.
5. Parents are requested to make their own arrangements for their stay and lunch. However, snacks and tea can be provided to candidates and parents on payment at Sainik School Kazhakootam (Thiruvananthapuram) Centre only.
6. He will be called for Interview and Medical Examination if he qualifies in the written test. No queries in this regard will be entertained.
7. Any attempt or malpractice by your son or on your part to influence the school administration in any way, will be considered a disqualification and may lead to rejection of the candidate.
8. Decision of the Principal on all matters connected with the Entrance Examination will be final and binding on all parents.
9. Please acknowledge the receipt of this Hall Ticket.

APPENDIX 'B'
(Refers to Para 1 Chapter II)
SAINIK SCHOOL, KAZHAKOOTAM (KERALA)
IDENTIFICATION CERTIFICATE - ENTRANCE EXAMINATION
(TO BE DETACHED AND SENT ALONG WITH THE APPLICATION FORM)

No.

1. Roll No..... KT (will be entered by office)
2. Name of the Candidate (In Block Letters)
.....
3. Date of Birth.....
4. Father's Name
5. Signature of the Parent/Guardian.....



Signature of the Head Master
with seal of the school where
the boy studying

6. Correspondence Address of the
Parent/Guardian, with Tel.No.
Date.....

APPENDIX 'C'
DATE OF BIRTH CERTIFICATE
(Refers to Para 3 Chapter II)

Certified that Master..... S/O.
Mr/Mrs(Address).....
.....is a bonafide
student of this school and studying in classHis Date of Birth as per our
school record is.....

2. This certificate has been issued to produce before the Sainik School authorities for
applying for All India Sainik Schools Entrance Examination.

Seal

Date

Signature of Headmaster/Principal

To

ROLL NO.....

Name of the Boy

Name of the Father.....

Full Postal address.....

.....

PIN.....

To

ROLL NO.....

Name of the Boy

Name of the Father.....

Full Postal address.....

.....

PIN.....

To

ROLL NO.....

Name of the Boy

Name of the Father.....

Full Postal address.....

.....

PIN.....

To

ROLL NO.....

Name of the Boy

Name of the Father.....

Full Postal address.....

.....

PIN.....