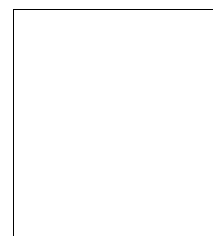


**LATERAL ENTRY EXAMINATION**  
**EKLAVYA MODEL RESIDENTIAL SCHOOL CLUSTER SURGUJA (CG)**

Class.....

Session.....



1.	Name of the Child	
2.	Date of Birth (dd /mm/ yyyy)	
3.	Age as on 31.03.20.....	..... Yrs .....Months
4.	Gender (Boy/ Girl/ Transgender) In case of transgender, Orientation towards Boy/Girl	
5.	Aadhar Number / Residence Proof	
6.	Blood Group (if available)	
7.	Reservation Category under which admission is sought (as per Admission Guidelines)	
8.	Name of the Tribe	
9.	Disability Status (Yes/ No)	
10.	Type of Disability and its Percentage	
11.	<b>Resident of (please tick any one)</b>	
	Block	
	Taluka	
	Tehsil	
	District	
	State	
12.	Father's Name	
13.	Mother's Name	
14.	Name of Guardian	
15.	<b>Occupation</b>	
	Father	
	Mother	

	Guardian	
16.	Native Language/ Mother Tongue	
17.	Class in which currently studying	
18.	Medium of Instruction	
19.	Name of the school attended	
20.	Address for Correspondence along with PIN	
20. (a)	Family income (Annual)	
21.	<b>Contact Number</b>	
	Father	
	Mother	
	Guardian	
22.	<b>Achievements</b> , if any, in	
	Co-curricular Activities	
	Games & Sports	
	Scouts & Guides, NCC, NSS, Adventure Activities	
	Other Activities	
23.	Have you participated in Student Exchange Program? if yes, give details.	
24.	Options for Admission in EMRSs of the State	
	Option No. 1	
	Option No. 2	
	Option No. 3	
	Option No. 4	
	Option No. 5	
25.	Medium of Instruction for EMRSST/ EMRSLT	
	Are you a drop out of any of EMRSs? if yes, furnish details: (only for lateral entry)	<b>Yes / No</b>
26.	Name of EMRS last studied	
	Year of Drop out	
	Reason for dropping out of EMRS	

27.	Have you ever been rusticated from any School? if yes, furnish details:	<b>Yes / No</b>
	Name of School from where you were rusticated	
	Year of Rustication	
	Reason of Rustication	
28.	I ..... Father/ Mother/ Guardian of ..... hereby declare the information provided by me in the application form in respect of my child/ ward is true to the best of my knowledge, belief and information.	
29.	<b>Signature(s) / Thumb impression</b>	
	Father / Mother/ Guardian	
	Child	

**Acknowledgement Receipt:**

1.	Registration Number	
2.	Date	
3.	Class in which admission is sought	
4.	Name of Child	
5.	Father's / Mother's/ Guardian Name	

