

DETAILS OF SERVICE

(To be provided by the DDO/Head of the office)

1. Name of the employee:
2. Designation :
3. Name of the employer/Department :.....
4. Dept. Category : State Govt./ State Govt. Autonomous/ Central Govt./ Central Govt. Autonomous
(Strike out which are not applicable) _____
5. Date of appointment :
6. Date of regularisation (if initially appointed on contractual basis) :
7. Nature of Present Appointment : REGULAR/ CONTRACTUAL/ AD-HOC _____
(Strike out which are not applicable)
8. Basic Pay: 9. Level:
10. Name and designation of DDO/Head of the office:
11. Contact number of DDO/ Head of the office:

Certified that the information furnished above is true and found correct from the office record.

Signature of the Head of the Office

(With Name, Designation and office stamp)

Place:

Name:

Date:

Designation:

**SERVICE CERTIFICATE
(for Central Govt.)**

Certified that Shri/Smt.....is working in the office/Ministry of He/She is an employee of **Defence Service/CRPF/BSF/NSG/SPG/CISF/Central Govt./Autonomous Body/Public Sector Undertaking** fully financed/partially financed by **Central Govt.** and his/her services are transferable anywhere in India.

**SERVICE CERTIFICATE
(for State Govt)**

Certified that Shri/Smt..... is working in the office/Ministry of He/ She is an employee of State Government transferable anywhere in the state.

Place:

Date:

Contact number of the authority/office :

Signature & Name (in block letters) and designation of the head of office with stamp

Name:

Designation:

CERTIFICATE OF NUMBER OF TRANSFERS

I, Smt/Shri _____ (Name) _____ (rank/designation) of _____

_____ (office), do hereby certify that during the past 7 years

(upto 31.03.2021) I have been transferred _____ (in figure & in word) from one station to another.

The detail of which are given as under

S N	Office/Unit	Place	Rank/ Designation	Period of stay		Period of stay	Order No & Date.
				From	To		
1.							
2.							
3.							
4.							
5.							
6.							

I know that if the above mentioned information is found incorrect, my child will be disqualified for admission in Kendriya Vidyalaya.

Signature of the Parent

COUNTER SIGNATURE BY HEAD OF THE OFFICE

I _____ (Name) _____ (rank/designation) of _____

_____ (unit/department) hereby certify that the particulars given

above have been authenticated by the records held in the office and found to be correct.

Signature of the Head of the Office

Contact number of the authority/office :

(With Name, Designation and office stamp)

Name:

Designation:

NOTE: STRIKE OUT WHICH ARE NOT APPLICABLE

CERTIFICATE FROM THE EMPLOYER

(Regarding Status of Employment & identification of Admission Category in KVS)

I Sri/Smt./Ms. _____ (Name of the Employer) ,
 designation _____ working in the office of
 _____ department of _____ , government of
 _____ do hereby certify the following in respect of Sri/Smt./Ms.
 _____ (Name of the Employee) whose son/daughter
 _____ (Name of the Child) is seeking admission in Kendriya
 Vidyalaya _____

01	Name of the Child for whom admission is sought (in Block Letters)	
02	Class in which admission is sought	
03	Full name of the employee (in Block Letters)	
04	Designation of the employee	
05	Employee Code / Employee Identity No.	
06	Name of the office where the employee is presently posted	
07	Status of Employment (Whether Permanent/ Regular/ Temporary/Contractual/ Part Time/ Adhoc/Daily Wage Basis/Casual -To be written clearly)	
08	This office/organization is Central Government/Central Government Autonomous body/PSU fully or partially financed by Govt. of India/State Government/ Sate Government Autonomous Body/ PSU fully or partially finance by the state govt. (To be written clearly)	
09	Whether the employee is to be considered as an employee of Central Government/ <i>Central Government Autonomous body</i> /PSU fully or partially financed by Govt. of India/State Government/ Sate Government Autonomous Body/ PSU fully or partially finance by the state govt. (Any one of the above to be written clearly)	
10	Please write any one of the following which is applicable i.r.o. the child for whom admission is sought 1. Children of transferable and non-transferable Central government employees and children of ex- servicemen. This will also include children of Foreign National officials, who come on deputation or transfer to India on invitation by Govt. of India. 2. Children of transferable and non-transferable employees of Autonomous Bodies / Public Sector Undertaking/Institute of Higher Learning of the Government of India. 3. Children of transferable and non-transferable State Government employees. 4. Children of transferable and non-transferable employees of Autonomous Bodies/ Public Sector Undertakings/Institute of Higher Learning of the State Governments. 5. Children from any other category	
11	Recent Pay/Salary of the Employee with proper Split up	(i) Pay Level : _____ (ii) Pay : _____ (iii) DA : _____ (iv) HRA : _____ (v) Any Other _____ (vi) Any Other : _____ (vii) Total :
12	Whether the employee is drawing the consolidated pay	YES / NO

Place: _____

Date: _____

Signature of the Certifying Authority with Seal

Complete Address of the Office:

Telephone Number: _____