

Medical Certificate

Health Details:

1. Height _____ (Cm), 2. Weight _____ (Kg) 3. Eye Sight _____
4. Any Physical disability: Yes / No, (If yes specify and enclose medical certificate) _____
5. Speech / Hearing problem if any mention detail _____

6. Suffering from any specific disease Yes/No. If Yes mention details _____

Certified that Master/ Miss _____ son/daughter of _____
_____ is medically fit.

Signature of the Medical Officer with seal Regd. No Date.....

Only for BPCL / BORL Employees

Certified that Master/ Miss son / daughter of

.....is to be treated as ward of BPCL / BORL for admission into DAV BORL.

Employee department.....Employee No.....

Signature of HR Officer..... Seal.....

Name Date.....

Contact persons other than the parents in case of emergency: -

Name	Relation	Contact No.
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Documents to be submitted at the time of admission

1. Original Transfer certificate for admission in class II onward (Countersigned TC in case of non CBSE School)	5. Copy of Board Mark Sheet/ Report card (Previous class)
2. Copy of Birth Certificate issued by competent authority (For admission in Nursery / LKG / UKG/ Std. I)	6. Copy of Bank Passbook containing Bank A/c No. & Bank IFSC Code (Student / Parents)
3. Copy of caste certificate (Student / Father)	7. One Passport Size photograph
4. Samagra ID (For MP resident student)	8. Copy of Aadhar Card (Students & Parents)