

# सैनिक स्कूल रीवा (म.प्र.)

## सत्र 2021-22 में कक्षा 6 में प्राविधिक प्रवेश प्राप्त छात्रों के मूल दस्तावेज जमा करने के संबंध में आवश्यक निर्देश

निम्नानुसार संलग्न सूची के अनुसार जिन्होंने सैनिक स्कूल रीवा में प्राविधिक प्रवेश लिया है, उनके अभिभावकों को नाम के सामने दर्शित तिथियों में भौतिक रूप से उपस्थित होकर अपने पुत्र/पुत्री के दस्तावेज जमा करना सुनिश्चित करें। भौतिक रूप से जमा किए जाने वाले दस्तावेजों की सूची निर्देश के साथ संलग्न है, जो कि पूर्व में भी आपको प्रेषित की गई थी।

Ser No	School No	Candidate Name	Father's Name	Entrance Roll No	Date for Document Submission
1	5304	RAMAN YADAV	VISHESHWAR YADAV	6602010602	06-09-2021
2	5305	PRANJAL MISHRA	KRISHNA KUMAR MISHRA	6602010283	06-09-2021
3	5306	DEVRAJ SINGH	OMKAR SINGH CHOUHAN	6602010679	06-09-2021
4	5307	AARUSH SINGH	RAJESH PRATAP SINGH	6604020064	06-09-2021
5	5308	AMAN SINGH KUSHWAH	MANOJ SINGH KUSHWAH	6602010180	06-09-2021
6	5309	KRISHNA BAIS	DHARMENDRA SINGH BAIS	6602010178	06-09-2021
7	5310	PRINCE RATHOUR	SHYAM SINGH RATHORE	6602010481	06-09-2021
8	5311	SACHIN SINGH	UDAY SINGH	6602010512	06-09-2021
9	5312	ARYAN GURJAR	RAJESH SINGH GURJAR	6602030025	06-09-2021
10	5313	ADITYA DHAKAR	ASHOK DHAKAR	6602010323	06-09-2021
11	5314	VINAY GURJAR	RAGHUVEER SINGH GURJAR	6602010225	07-09-2021
12	5315	ROHIT DHAKAD	VINOD DHAKAD	6602020282	07-09-2021
13	5316	DIVYANSH SINGH	MUKESH SINGH	6602010705	07-09-2021
14	5317	DIVYANSHU	ALKESH SINGH	6602020289	07-09-2021
15	5318	PRASHANT YADAV	SANJU SINGH YADAV	6602010561	07-09-2021
16	5319	ASHUTOSH TIWARI	DIVAKER TEWARI	6604010134	07-09-2021
17	5320	ABHAY KUMAR SHARMA	GURU PRASAD SHARMA	6604020415	07-09-2021
18	5321	AARAV GOUR	MANOJ KUMAR	6602010557	07-09-2021
19	5322	SUMIT	DINESH	6602020353	07-09-2021
20	5323	HARSH SINGH	RANKENDRA SINGH	6604020130	07-09-2021
21	5324	DHRUV SINGH	JAY SINGH	6604040092	08-09-2021
22	5325	ANMOL KUSHWAH	AMAR SINGH KUSHWAH	6602010062	08-09-2021
23	5326	PRAMOD KUMAR SAHU	INDRA LAL SAHU	6604040062	08-09-2021
24	5327	SACHIDANAND KUMAR	MANOJ KUMAR	5507020046	08-09-2021
25	5328	CHETAN CHARAN	LAXMAN RAM	7506010399	08-09-2021
26	5329	AMAN SEMIL	HAKIM SEMIL	6602010220	08-09-2021
27	5330	AMIT YADAV	KAMLESH YADAV	6602030222	08-09-2021
28	5331	VIKAS YADAV	ANIL YADAV	5901020068	08-09-2021
29	5332	AMRIT RAAZ BHARTI	RAKESH KUMAR BHARTI	6604030113	08-09-2021
30	5333	ANKIT KUMAR	RAVINDRA KUMAR	6602010076	08-09-2021
31	5334	AMRIT RAJ	SHIV KUMAR	6603020222	09-09-2021
32	5335	ABHAY PRATAP SINGH GURJAR	JAINENDRA SINGH GURJAR	6602030227	09-09-2021
33	5336	SHIVAM RATHOR	POORAN SINGH RATHOR	6602010674	09-09-2021
34	5337	AYUSH DHAKAD	KEDAR SINGH DHAKAD	6602010295	09-09-2021
35	5338	NITIN RAMPURE	RAVI RAMPURE	6602010212	09-09-2021
36	5339	HARSH DHARI	BEERBRAT DHARI	5701030259	09-09-2021
37	5340	ASHIK SINGH	BABU RAM	6602010369	09-09-2021
38	5341	PRACHETA KATYAYANI	INDRA MOHAN VERMA	6601030023	09-09-2021
39	5342	AYUSH DHAKAD	SUBHASH DHAKAD	6602010646	09-09-2021

<b>Ser No</b>	<b>School No</b>	<b>Candidate Name</b>	<b>Father's Name</b>	<b>Entrance Roll No</b>	<b>Date for Document Submission</b>
40	5343	ADVITA TIWARI	AMIT KUMAR TIWARI	6604030327	09-09-2021
41	5344	AMAN DHAKAD	RAKESH DHAKAD	6602010515	10-09-2021
42	5345	SHREYANSH SINGH	JOGENDRA SINGH	6604010006	10-09-2021
43	5346	JACKY LODHI	PRAMOD SINGH	6602010207	10-09-2021
44	5347	ADITYA MITTAL	UMESH KUMAR	6604020277	10-09-2021
45	5348	ISHU VIMAL	RAJESH SINGH	6602030065	10-09-2021
46	5349	AMAN KUMAR	MUNNA KUMAR	6604030316	10-09-2021
47	5350	INDRA PRATAP AHIRWAR	BUDDHI PRATAP AHIRWAR	6604010411	10-09-2021
48	5351	JYOTI KUMARI	SUBHASH	6602010282	10-09-2021
49	5352	VANDANA SUMAN	BRAJESH SUMAN	6602010023	10-09-2021
50	5353	SHEETAL DHAKAD	RAMMOORTI SINGH DHAKAD	6602030291	10-09-2021
51	5354	NISHANT KUMAR	NIRANJAN PASWAN	5506010378	11-09-2021
52	5355	BHAVYA BAMNIYA	MEHATABSINGH BAMNIYA	6601050187	11-09-2021
53	5356	PAYAL SARAP	GAJANAN DAYARAM SARAP	6602010677	11-09-2021
54	5357	YUVRAJ DAMOR	MANJU DAMOR	6601020050	11-09-2021
55	5358	AARAV KUMAR	RAKESH KUMAR	6602030158	11-09-2021
56	5359	VARSHA SINGH	KRIPA SHANKAR SINGH	6603010084	11-09-2021
57	5360	RASHMI MUJALDE	BHARATSINGH MUJALDE	6601030307	11-09-2021
58	5361	DIVYANSHI RATHORE	RAMSINGH RATHORE	6601040164	11-09-2021
59	5362	ANAMIKA PRIYA	UPENDRA CHAUDHARY	5507020119	11-09-2021

अभिभावक अपने पुत्र/पुत्री के प्रवेश हेतु निम्नलिखित मूल दस्तावेजों को निर्धारित तिथि में अनिवार्य रूप से उपस्थित होकर जमा करना सुनिश्चित करें :-

क्र.	दस्तावेज का प्रकार	टिप्पणी
क	माता का आमदनी प्रमाण-पत्र	तहसीलदार द्वारा जारी
ख	पिता का आमदनी प्रमाण-पत्र	तहसीलदार द्वारा जारी
ग	मूल (स्थायी) निवास प्रमाण-पत्र	तहसीलदार/एसडीएम द्वारा जारी
घ	जाति प्रमाण पत्र (आरक्षित श्रेणी के लिए)	एस.डी.एम./तहसीलदार द्वारा जारी
ङ	पंजीयक जन्म/मृत्यु कार्यालय द्वारा जन्म प्रमाण-पत्र प्रारूप 5 में	पंजीयक/उप पंजीयक जन्म मृत्यु द्वारा जारी
च	नियोक्ता द्वारा प्रमाणित मासिक वेतन पर्ची (कर्मचारियों के लिए)	नियोक्ता कार्यालय द्वारा जारी
छ	रक्षा सेवा सह रिश्ता प्रमाण-पत्र, छात्र के जन्म के पार्ट टू आर्डर क्र एवं दिनांक सहित (कार्यरत सैनिक के लिए)	कमान अधिकारी द्वारा हाल में जारी
ज	भूतपूर्व सैनिक प्रमाण-पत्र (रैंक सहित)	जिला सैनिक कल्याण अधि-कारी द्वारा हाल में जारी
झ	रक्षा सेवा निवृत्ति पुस्तिका की प्रमाणित छायाप्रति (भूतपूर्व सैनिकों के लिए)	राजपत्रित अधिकारी द्वारा सत्यापित
ञ	परिवार एवं छात्र की समग्र आईडी (म.प्र. निवासियों के लिए, मूल निवास के पते का)	समग्र पोर्टल से किया गया अद्यतन प्रिन्ट
ट	माता, पिता व छात्र का आधार कार्ड की प्रमाणित छायाप्रति	राजपत्रित अधिकारी द्वारा सत्यापित
ठ	पूरी फीस देने हेतु अनुबंध पत्र (संलग्न प्रारूप क्र. 01 के अनुसार)	₹ 100 के गैर-न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित
ड	छात्रवृत्ति की पात्रता रखने वाले अभ्यर्थी हेतु अनुबंध पत्र (संलग्न प्रारूप क्र. 02 के अनुसार)	₹ 100 के गैर-न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित
ढ	बंधक पत्र (संलग्न प्रारूप क्र. 03 के अनुसार)	₹ 100 के गैर-न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित
ण	आमदनी का शपथ पत्र (संलग्न प्रारूप क्र. 04 के अनुसार)	₹ 10 के गैर-न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित
त	निवास का शपथ (संलग्न प्रारूप क्र. 05 के अनुसार)	₹ 10 के गैर-न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित
थ	जोखिम प्रमाण-पत्र (संलग्न प्रारूप क्र. 06 के अनुसार)	₹ 10 के गैर-न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित
द	शुल्क प्रमाण-पत्र (संलग्न प्रारूप क्र. 07 के अनुसार)	₹ 10 के गैर-न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित
ध	अविवाहित प्रमाण-पत्र (संलग्न प्रारूप क्र. 08 के अनुसार)	₹ 10 के गैर-न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित
न	रैगिंग का शपथ पत्र (संलग्न प्रारूप क्र. 09 के अनुसार)	₹ 10 के गैर-न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित
प	अंतर्सैनिक स्कूल स्थानांतरण हेतु अभिभावक का शपथ-पत्र (संलग्न प्रारूप क्र. 10 के अनुसार)	₹ 10 के गैर-न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित
फ	स्वास्थ्य संबंधी विवरण पत्र (दो प्रतियों में)	संलग्न प्रारूप क्र. 11 में
ब	सामान्य/अनु.जाति/अनु.जनजाति/अन्य पिछड़ा वर्ग का घोषणा पत्र	संलग्न प्रारूप क्र. 12 में
भ	स्थाई एवं पत्राचार का पता	संलग्न प्रारूप क्र. 13 में
म	यात्रा प्रमाण-पत्र	संलग्न प्रारूप क्र. 14 में
य	परिवार एवं अभिभावक का विवरण फोटो सहित	संलग्न प्रारूप क्र. 15 में
र	स्थानांतरण प्रमाण पत्र	सक्षम प्राधिकारी द्वारा काउंटर साइन किया हुआ

**नोट :** सरल क्रमांक (ड) से (य) तक के प्रारूप (नमूना) संलग्न है। कृपया नमूना के अनुसार ही दस्तावेज तैयार करें। सही प्रारूप में उपर्युक्त निर्देशित दस्तावेज की अनुपलब्धता की स्थिति में आपके पुत्र/पुत्री/पाल्य को दिया गया प्राविधिक प्रवेश निरस्त किया जा सकता है।

प्रारूप क्र. 01

यह नमूना है। इसे ₹ 100 के गैर न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित करवा कर जमा करना है।

**AGREEMENT FORM TO BE EXECUTED BY THE PARENTS/GUARDIANS OF  
FULL FEE PAYING STUDENT AT SAINIK SCHOOL REWA**

THIS AGREEMENT is made this \_\_\_\_\_ day of \_\_\_\_\_ 2021 between  
(Date of admission) (Month of admission)  
\_\_\_\_\_ of \_\_\_\_\_ (hereinafter  
(Name of father) (Address)  
called the Guarantor, which expression shall unless excluded by the context of the meaning thereof the  
deemed to include his heirs, executors, administrator, and legal representatives) of the one part and the  
Board of Governors, Sainik Schools Society (hereinafter) called the 'Governors' which expression shall  
unless excluded by the context or the meaning thereof be deemed to include the Principal of the Sainik  
School, Rewa of the other part.

WHEREAS \_\_\_\_\_ son/Daughter of \_\_\_\_\_  
(Name of student) (Name of Father)  
(hereinafter called the student) is the son/ward of the guarantor and has at the request of the guarantor  
been selected for admission to the Sainik School, Rewa (MP) inter alia, on the terms and conditions  
hereinafter appearing for the purpose of receiving education in a Sainik School.

NOW IT IS HEREBY AGREED BY AND between the parties hereto as follows: -

That in consideration of the student being admitted by the Governors to the Sainik School for the  
purpose of the aforesaid education at the request of the guarantor, he the guarantor, covenants with  
Governors that the student will attend the Sainik School regularly and will observe and comply with all  
the rules and regulations thereof for the prescribed period and that he, the guarantor, shall pay to  
Governors, for training for entry to the Regular Armed Forces and that he, the guarantor shall pay to  
the Governors regularly and promptly and whenever called upon to do so all the fees as prescribed for  
education in Sainik School.

That the Governors will not be liable for any damages/charges on account of injuries which may  
be sustained by the student any time during his stay in the School while taking part in sports or other  
extra curricular activities of the School or on account of any other reason directly or indirectly related to  
his stay as a student in the School. All expenses that may be incurred in the treatment of such injuries  
will be borne by the Parent/Guardian as provided in the rules of the said School.

And that if there is any dispute as to the effect or meaning of these presents or in any way  
touching or arising out of these of presents, the same shall be referred to the sole arbitration of the  
Board of Governors, Sainik Schools, whose decision shall be final.

(Contd....P/2)

IN WITNESS WHERE OF \_\_\_\_\_ has set his  
(Name of Father)  
hand PRINCIPAL, SAINIK SCHOOL, REWA by order and direction of the Board of Governors has set his  
hand the day the year first above written.

Signature of Parent/ Guardian  
Name \_\_\_\_\_  
Relation with Student \_\_\_\_\_

Principal  
Sainik School, Rewa (MP)  
for and on behalf of the Board of Governors  
Sainik Schools Society

Signature Attested

Signature & Seal of  
Gazetted Officer

**NOTES:**

- (a) The agreement form is to be duly stamped. The necessary stamped paper for ₹ 100/- or of such values as prescribed for this purpose is to be purchased by the guarantor from the Local Revenue Officer.
- (b) Government Servant of Gazetted status who should sign together with his seal of Office in token of having witnessed the signature of the guarantor
- (c) The space provided for the date in the Ist para of the Agreement Form should not be filled in by the guarantor. This will be filled in on the date on which the agreement will be signed by the Principal, Sainik School.

प्रारूप क्र. 02

यह नमूना है। इसे ₹ 100 के गैर न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित करवा कर जमा करना है।

**AGREEMENT FORM TO BE EXECUTED BY THE PARENTS/GUARDIANS OF STUDENTS, OTHER THAN FULL FEE PAYING, AT SAINIK SCHOOL REWA**

THIS AGREEMENT is made this \_\_\_\_\_ day of \_\_\_\_\_ 2021 between \_\_\_\_\_ of \_\_\_\_\_ (hereinafter called the Guarantor, which expression shall unless excluded by the context of the meaning thereof the deemed to include his heirs, executors, administrator, and legal representatives) of the one part and the Board of Governors, Sainik Schools Society (hereinafter) called the 'Governors' which expression shall unless excluded by the context or the meaning thereof be deemed to include the Principal of the Sainik School, Rewa of the other part.

WHEREAS \_\_\_\_\_ son/daughter of \_\_\_\_\_ (hereinafter called the student) is the son/ward of the guarantor and has at the request of the guarantor been selected for admission to the Sainik School, Rewa (MP) inter alia, on the terms and conditions hereinafter appearing for the purpose of receiving education with a view to making the Regular Armed Forces, his profession in life, if considered by the appropriate to authority to be suitable and if there is any vacancy and if he be selected.

NOW IT IS HEREBY AGREED BY AND between the parties hereto as follows: -

That in consideration of the student being admitted by the Governors to the Sainik School for the purpose of the aforesaid education at the request of the guarantor, covenants with Governors that the student will attend the Sainik School regularly and will observe and comply with all the rules and regulations thereof for the prescribed period or until he is declared fir for admission to any Institution as may from time to time prescribed by the Governors, for training for entry to the Regular Armed Forces and that he, the guarantor shall pay to the Governors regularly and promptly and whenever called upon to do so all the fees as prescribed, if he is not in receipt of any scholarship.

That if for any reasons not beyond the control of either the student or the guarantor the student fails to pursue his studies at the said School before appearing for selection for entry to any institution as may from time to time be prescribed by the Governors for training for entry to the Regular Armed Forces or fails to appear for the said selection or in the event of his not succeeding in the said selection, fails to reappear for selection, till such time as his age permits him to do so, according to the rules and regulations.

For the time being in force or having been declared successful at the said selection does not proceed to one of the said institutions to which he may be directed to proceed for being trained for entry into the Regular Armed Forces or having joined the said institutions fails to complete the training there

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at for the entry into the Regular Armed Forces or fails to join the Regular Armed Forces after completing the training at the said Institution, then and if any such case the guarantor shall forth-with pay to the Governors in cash the sum the student has received from the School and/or and State Government/Central Government the value of the Scholarships he has received for the period the student was in the said School.

That if after admission any of the following viz, proof of Domicile, certificate of age and statement of income supplied by the guarantor, is found to be false in any way or not in order the guarantor shall forthwith pay to the Governors in cash the sum the student has received from the School and/or the State Government/Central Government (the value of the scholarships he received) for the period the student was at the said School.

That if after admission, the student is found to be medically unfit in any way at the time which might, according to the opinion of the appropriate medical authority, render him unfit for his future entry to the Regular Armed Forces, the student will be withdrawn at once, but it would be open to the guarantor to retain at the School on payment of the full fee prescribed by the Governors from the date student is found medically unfit.

That the Governors will not liable for any damage/charges on account of injuries which may be sustained by the student at any time during the stay in the School or while taking part in sports or other extra-curricular activities, in the School or NCC activities, Camp and Adventure, Educational Tours, Excursions, Hikes, Cycle Hikes, Swimming organized by the School and other courses to which the boy may be sent by the School or during journey from School to home & back or during booking out or during administration of anesthesia or surgical operations which may be carried out by way of treatment. All expenses that may be incurred treatment of such injuries will be borne by the parent/guardian as provided in rules of the said School.

That in the event of any question, dispute or difference arising under this agreement (except as to any matters the decision of which is specially provided for by this agreement) the same shall be referred to the sole arbitration of an Officer appointed by the Secretary, Ministry of Law, Govt of India, New Delhi. It will be no objection that the arbitrator is a Government servant that he has to deal with matters to which the contract related. The award of the arbitrator shall be final and binding on the parties to the contract. In the event of the arbitrator retiring or being unable to act for any reason, it shall be lawful for the Secretary to nominate another arbitrator Under Act, 1940 and the rules framed there under and any statutory modification thereto etc shall apply to the arbitration prescribed under this clause.



IN WITNESS WHERE \_\_\_\_\_ has set his  
hand and PRINCIPAL, SAINIK SCHOOL, REWA by order and direction of the Board of Governors has set  
his hand the day the year first above written.

Signature of Parent/ Guardian  
Name \_\_\_\_\_  
Relation with Student \_\_\_\_\_

Principal  
Sainik School, Rewa (MP)  
for and on behalf of the Board of Governors  
Sainik Schools Society

Signature Attested

Signature & Seal of  
Gazetted Officer

**NOTES:**

- (a) The agreement form is to be duly stamped. The necessary stamped paper is to be purchased by the guarantor from the Local Revenue Officer.
- (b) Government Servant of Gazetted status who should sign together with his seal of Office in token of having witnessed the signature of the guarantor.
- (c) The space provided for the Ist para of the Agreement Form should not be filled in by the Guarantor this will be filled on the date on which the agreement will be signed by the Principal, Sainik School, Rewa.

**प्रारूप क्र. 03**  
यह नमूना है। इसे ₹ 100 के गैर न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित करवा कर जमा करना है।

**BOND TO BE EXECUTED BY PARENTS/GUARDIANS OF  
MADHYA PRADESH STATES SCHOLARSHIP STUDENT/OTHER STATE AT SAINIK SCHOOL,  
REWA**

Know all men by these parents that we (1) \_\_\_\_\_ aged \_\_\_\_\_ son /  
daughter of (2) Shri \_\_\_\_\_ (Name of student) (here-in-after called the bounden) Vill & PO  
\_\_\_\_\_  
(Name of Father) \_\_\_\_\_ District \_\_\_\_\_ and  
\_\_\_\_\_  
(Address) \_\_\_\_\_  
(3) Shri \_\_\_\_\_ son of (4) Shri \_\_\_\_\_ and  
(Name of father) \_\_\_\_\_ parent/guardian of (5) \_\_\_\_\_ Vill & PO \_\_\_\_\_ District  
(Name of student) \_\_\_\_\_  
\_\_\_\_\_ and (6) Shri \_\_\_\_\_ S/o \_\_\_\_\_  
(Name of surety-1) \_\_\_\_\_  
Town/Vill & PO \_\_\_\_\_ District \_\_\_\_\_ and  
(7) Shri \_\_\_\_\_ S/o \_\_\_\_\_ Town/Vill & PO \_\_\_\_\_  
(Name of surety-2) \_\_\_\_\_  
\_\_\_\_\_ District \_\_\_\_\_ (hereinafter called the Sureties do hereby  
bind ourselves, our heirs, executors and administrators jointly and severally to pay to the Government  
of Madhya Pradesh (hereinafter called the "Government") on demand the total amount enjoyed in form  
of scholarship.

Signed and dated this \_\_\_\_\_ day of \_\_\_\_\_ 2021. WHEREAS the bounden had been  
granted admission in the Sainik School (Madhya Pradesh) at REWA.

And WHEREAS the bounden had been granted a scholarship subject to the condition that: -

- (i) The bounden shall strictly confirm to the rules for the award of scholarship for studies in the Sainik School issued under Govt rules and instructions issued from time to time (hereinafter referred to as Rules and Regulations).
- (ii) The bounden shall not discontinue the courses, except reasons beyond his control and beyond the control of the parent/guardian and with the written permission of the Principal of the School.
- (iii) The bounden shall conform to and observe all the rules and conditions regarding the study, discipline and conduct as may be prescribed by the authorities of the School from time to time.
- (iv) The bounden shall after successfully completing the course of study at the Sainik School (Madhya Pradesh) within the prescribed period, join the National Defence Academy.

Now the condition of the above written obligation in the event of the bounden not conforming to or observing the rules and instructions and conditions regarding the studies of discontinuing the course without the prior permission in writing of the Principal/getting continued adverse report of his conduct or failing to join the National Defence Academy on the completion of his studies at School, the bounden the said parent/guardian and the sureties shall forthwith pay the Government, the total amount of the scholarship actually received by the bounden and the amount calculated at one tenth of aggregate value of the scholarship rounded to the next decimal digit as a damage and upon payment of such sum the above written obligations shall be avoided and of on effect otherwise this shall be and remain in full

force and effect. Provided that the bounden the parent/guardian and sureties do hereby agree that sum found due to the Govt. under by virtue of these presents, may be received jointly and severally from them and their properties, movable and immovable as if such dues were arrears of land Revenue Recovery Act for the time being in force in such other manner as the Government may deem fit.

The liability to the Parent/Guardian and the surety under this bond is co-extensive with that of the bounden and shall not be effected by the Government giving time or any other indulgence to the bounden or by the Government varying any of the terms and conditions herein contained.

**IN WITNESS THEREOF THE BOND**

(8) Shri/Ku \_\_\_\_\_ Parent/Guardian (9) Shri \_\_\_\_\_  
(Name of student) (Name of father)  
on her/his own behalf of the bond and the sureties (10) \_\_\_\_\_ and  
(Name of surety-1 )  
(11) Shri \_\_\_\_\_ have/has upto set their hands the day of year first above  
(Name of surety-2 )  
written.

Signed by Shri/Ku \_\_\_\_\_  
(Name of bounded Boy )

\_\_\_\_\_  
(Signature )

in presence of witness.

1. \_\_\_\_\_  
(Name and address of the witness 1)

\_\_\_\_\_  
(Signature)

2. \_\_\_\_\_  
(Name and address of the witness 2)

\_\_\_\_\_  
(Signature)

Signed by \_\_\_\_\_  
(Name of father/guardian in the presence of witness)

\_\_\_\_\_  
(Signature)

1. \_\_\_\_\_  
(Name and address of the witness 1)

\_\_\_\_\_  
(Signature)

2. \_\_\_\_\_  
(Name and address of the witness 2)

\_\_\_\_\_  
(Signature)

Signed by \_\_\_\_\_  
(Name & address of Ist surety in presence of witness) \_\_\_\_\_  
(Signature)

1. \_\_\_\_\_  
(Name and address of the witness 1) \_\_\_\_\_  
(Signature)

2. \_\_\_\_\_  
(Name and address of the witness 2) \_\_\_\_\_  
(Signature)

Signed by \_\_\_\_\_  
(Name & address of IInd surety in presence of witness) \_\_\_\_\_  
(Signature)

1. \_\_\_\_\_  
(Name and address of the witness 1) \_\_\_\_\_  
(Signature)

2. \_\_\_\_\_  
(Name and address of the witness 2) \_\_\_\_\_  
(Signature)

(Seal to be executed in the presence of FIRST CLASS MAGISTRATE/SDM hereunder)

**NOTE:** बॉण्ड पत्र में खाली स्थानों पर चिन्हांकित अंकों के स्थान पर निम्नानुसार जानकारी भरी जाय –

रिक्त स्थान (1) में – छात्र का नाम

रिक्त स्थान (2) में – पिता/अभिभावक का नाम

रिक्त स्थान (3) में – पिता/अभिभावक का नाम

रिक्त स्थान (4) में – पिता/अभिभावक के पिता का नाम

रिक्त स्थान (5) में – छात्र का नाम

रिक्त स्थान (6) में – प्रथम जमानतदार का नाम

रिक्त स्थान (7) में – द्वितीय जमानतदार का नाम

रिक्त स्थान (8) में – छात्र का नाम

रिक्त स्थान (9) में – पिता/अभिभावक का नाम

रिक्त स्थान (10) में – प्रथम जमानतदार का नाम

रिक्त स्थान (11) में – द्वितीय जमानतदार का नाम

“सभी गवाह अलग-अलग होने चाहिए तथा जमानतदार गवाह नहीं बन सकते।”

प्रारूप क्र. 04

यह नमूना है। इसे ₹ 10 के गैर न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित करवा कर जमा करना है।

**AFFIDAVIT OF INCOME**

I, \_\_\_\_\_ S/o / W/o of Shri \_\_\_\_\_  
(Name of father/mother/guardian)  
father/mother/guardian of \_\_\_\_\_ hereby solemnly declare and affirm  
(Name of student)  
that my income from all sources is as per certificates submitted by me.

**CERTIFICATE**

1. I undertake to refund the whole amount of the scholarship awarded to my son or pay any other penalty, if our income are found to be in excess of that stated in the income certificate submitted by me.
2. I undertake to intimate the change, if any, in our income to the School authorities, failing which I will be held responsible for all the consequences.
3. That I have submitted separate income certificate of my wife / husband.
4. I hereby solemnly declare that this certificate is true to the best of my knowledge and belief and nothing has been concealed in it and no part of it is false.

Place

DEPONENT: \_\_\_\_\_

(Signature of Father / Mother / Guardian as applicable)

Date

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

**Witness:**

**Attested by Notary**

1. Signature \_\_\_\_\_

Name \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

2. Signature \_\_\_\_\_

Name \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

प्रारूप क्र. 05

यह नमूना है। इसे ₹ 10 के गैर न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित करवा कर जमा करना है।

**AFFIDAVIT OF DOMICILE**

1. I, \_\_\_\_\_ S/o / W/o of Shri \_\_\_\_\_  
(Name of father/Mother/Guardians)  
father/mother/guardian of \_\_\_\_\_  
(Name of Student) hereby solemnly declare and affirm  
that I belong to Village/Town \_\_\_\_\_ PO \_\_\_\_\_ Teh \_\_\_\_\_  
Distt \_\_\_\_\_ (A domicile Certificate issued by the competent authority is  
enclosed herewith).

2. I also guarantee that in case of my domicile is found incorrect or false, I shall be liable to refund the entire amount of scholarship awarded to the student and/or any other penalty as may be imposed by the Government.

3. I further declare that above statement regarding my State of Domicile is correct to the best of my knowledge and belief and that nothing has been kept concealed.

NOTE: - The affidavit from mother be accepted only if father is dead and from the guardian if both father and mother of the boy are dead.

Place

DEPONENT: \_\_\_\_\_

(Signature of Father / Mother / Guardian as applicable)

Date

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

**Witness:**

**Attested by Notary**

1. Signature \_\_\_\_\_

Name \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

2. Signature \_\_\_\_\_

Name \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

प्रारूप क्र. 06

यह नमूना है। इसे ₹ 10 के गैर न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित करवा कर जमा करना है।

**AFFIDAVIT  
RISK CERTIFICATE**

I, \_\_\_\_\_ father/guardian of \_\_\_\_\_, who is a student of Sainik School, Rewa hereby certify that I fully understand my son/daughter/ward will undergo education at Sainik School, Rewa (MP) with my full and free consent and under my own risk and that I or my legal heirs my son/ward shall not be entitled to any claim or compensation other relief from the Board of Governors of Sainik School, Rewa in respect of any injury which my son/ward may sustain while in the School or during journey to or from the School to home or any place where he is directed to proceed by the School authorities or during NCC Training , NCC Camps, Educational Tours, Excursions etc or where badly infirmity or death results in the course of or as a result of Surgical Operation performed upon or anesthesia administered to him for the treatment or any injury received or illness as aforesaid or otherwise.

Place

Signature of Parent/Guardian with address:

Date

\_\_\_\_\_

**Witness:**

**Attested by Notary**

1. Signature \_\_\_\_\_

Name \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

2. Signature \_\_\_\_\_

Name \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

प्रारूप क्र. 07

यह नमूना है। इसे ₹ 10 के गैर न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित करवा कर जमा करना है।

**FEES CERTIFICATE**

1. Certified that I have read the joining instructions carefully. I am sending my child/ward for admission to Sainik School, Rewa (MP) at my own risk. In case the scholarship is not awarded by the State Government/Central Government, I will meet all the expenses incurred during his stay in the School.
2. I also undertake to pay the enhanced fees as may be indicated from time to time.

Place

Signature of Parent/Guardian with address:

Date

\_\_\_\_\_

**Witness:**

**Attested by Notary**

1. Signature \_\_\_\_\_

Name \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

2. Signature \_\_\_\_\_

Name \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_



प्रारूप क्र. 08

यह नमूना है। इसे ₹ 10 के गैर न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित करवा कर जमा करना है।

**UNMARRIED CERTIFICATE**

It is certified that my son/daughter/ward \_\_\_\_\_ Roll No. \_\_\_\_\_ is unmarried at the time of admission to Sainik School Rewa (MP) in class \_\_\_\_ and I hereby give an undertaking that he will remain so during his stay in the School till he completes his education.

Place

Signature of Parent/Guardian with address:

Date

\_\_\_\_\_

**Witness:**

**Attested by Notary**

1. Signature \_\_\_\_\_

Name \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

2. Signature \_\_\_\_\_

Name \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

प्रारूप क्र. 09

यह नमूना है। इसे ₹ 10 के गैर न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित करवा कर जमा करना है।

**AFFIDAVIT BY PARENT / GUARDIAN**

1. Mr./Mrs./Ms. \_\_\_\_\_ (full name of parent / guardian) father/mother/guardian of \_\_\_\_\_ Roll No \_\_\_\_\_ (full name of student with admission/ registration/enrolment number), having been admitted to Sainik School Rewa.
2. I am fully aware of what constitutes ragging.
3. I am also fully aware of the penal and administrative action that is liable to be taken against my ward in case he is found guilty of indulging in or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
4. I hereby solemnly aver and undertake that :-
  - (a) My ward will not indulge in any behaviour or act that may be constituted as ragging.
  - (b) My ward will not participate in or abet or propagate any act of commission or omission that may be constituted as ragging.
5. I hereby accept that, if found guilty of ragging, my ward is liable for punishment without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.
6. I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, the admission of ward is liable to be cancelled. Declared this \_\_\_\_\_ day of \_\_\_\_\_ month of 2021.

(Signature of Deponent)

Name \_\_\_\_\_

Address \_\_\_\_\_

Tel/Mobile No \_\_\_\_\_

**VERIFICATION**

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein. Verified at \_\_\_\_\_ (place) on this the \_\_\_\_\_ (day) of \_\_\_\_\_ (month), 2021.

\_\_\_\_\_  
(Signature of Deponent)

Solemnly affirmed and signed in my presence on this the \_\_\_\_\_ (day) of \_\_\_\_\_ (month), 2021 after reading the contents of this affidavit.

OATH COMMISSIONER / NOTARY

प्रारूप क्र. 10

यह नमूना है। इसे ₹ 10 के गैर न्यायिक मुद्रांक पर नोटरी द्वारा सत्यापित करवा कर जमा करना है।

**AFFIDAVIT**

I, Mr./Mrs. \_\_\_\_\_ (full name of parent / guardian)  
father/mother/guardian of \_\_\_\_\_ (full name of student with admission/  
registration/enrolment number), having been admitted to Sainik School Rewa Resident of  
\_\_\_\_\_ do hereby solemnly  
affirm and declare as under :-

1. That I will not apply for transfer of my son from this School to another Sainik Schools. He will complete his studies in Sainik School Rewa only.
2. That I obey the all rules and regulations of the said School.

\_\_\_\_\_  
(Signature of Deponent)  
Name \_\_\_\_\_  
Address \_\_\_\_\_

**VERIFICATION**

Verified that the concepts of this affidavit are true and correct to the best of my knowledge and nothing has been concealed therein.

Date :  
Place :

\_\_\_\_\_  
(Signature of Deponent)

**Attested by Notary**

### MEDICAL HISTORY : Sheet A

Certificate to be filled by parent of guardian with the help of Doctor and signed before the boy is sent to the School. The suppression of important information about past or present serious sickness or disease or infection suffered by the boy will be recorded as breach of contract.

Name of student \_\_\_\_\_ Roll No. \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Yrs \_\_\_\_\_ Months.

1. Has he had

(a)	Chicken pox	:	if so, when?	
(b)	Small pox	:	if so, when?	
(c)	Measles	:	if so, when?	
(d)	Mumps	:	if so, when?	
(e)	Diphtheria	:	if so, when?	
(e)	Whooping cough	:	if so, when?	
(f)	Enteric Fever	:	if so, when?	
(g)	Rheumatic Fever	:	if so, when?	
  
2. Has he been successfully?

(a)	Vaccinated against small pox	:	if so, when?	
(b)	Re-vaccinated against small pox	:	if so, when?	
(c)	Inoculated against Typhoid	:	if so, when?	
  
3. Has he been actively immunized against:

(a)	Diphtheria	:	if so, when?	
(b)	Whooping cough	:	if so, when?	
(c)	Any other disease	:	if so, when?	
  
4. Has he had:

(a)	Fit	:	if so, when?	
(b)	Asthma	:	if so, when?	
(c)	Raptures	:	if so, when?	
(d)	Surgical Operation	:	if so, when?	
(e)	Any other serious	:	if so, when?	
  
5. Are his tooth in good condition : \_\_\_\_\_
6. Does the boy wear glasses : \_\_\_\_\_
7. Does the boy suffer from ailments of : \_\_\_\_\_  
 constitutional peculiarity affecting the  
 general health, sight, hearing etc
8. Is he in your opinion fit in all respect : \_\_\_\_\_  
 for the Sainik School life?
9. Is there any other information that : \_\_\_\_\_  
 you think the School Medical Officer  
 should have?
10. BLOOD GROUP : \_\_\_\_\_ (Attach certificate)
11. Parents are required to submit the certificate from the doctor who has vaccinated, re-vaccinated and inoculated the boy against small and typhoid.

Place  
Date

Signature \_\_\_\_\_  
 Name & Address of parent / guardian

**(Countersigned by Doctor)**



**DECLARATION OF CATEGORY (SC/ST/OBC/GEN)**

Certified that I do belongs to SCHEDULED CASTE / SCHEDULED TRIBE/OTHER BACKWARD CLASS / GENERAL COMMUNITY .

Date: \_\_\_\_\_

(Signature of the Parent/Guardian)

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

NOTE: (i) Strike – off whatever is not applicable.



**JOURNEY CERTIFICATE**

1. My son / daughter / ward \_\_\_\_\_ Roll No. \_\_\_\_\_ to be admitted in Class \_\_\_\_\_ will travel from the School during Winter/Summer Vacation as per the following arrangements: -

Under my own arrangements.

On his own at my risk.

2. The above will be standing instructions for the travel of my son. As and when there will be any change in my choice regarding the travel of my son I will intimate well in advance.

Place:

Signature \_\_\_\_\_

Date:

Name & Address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



**SAINIK SCHOOL, REWA (MP)**  
**FAMILY DETAILS OF THE STUDENT - PART I**

1. Roll No. \_\_\_\_\_ Name \_\_\_\_\_

2. Father's Name \_\_\_\_\_  
Age \_\_\_\_\_  
Signature \_\_\_\_\_

Father's  
Photograph

3. Mother's Name \_\_\_\_\_  
Age \_\_\_\_\_  
Signature \_\_\_\_\_

Mother's  
Photograph

4. Brother's Name \_\_\_\_\_  
Age \_\_\_\_\_  
Signature \_\_\_\_\_

Brother's  
Photograph

Brother's Name \_\_\_\_\_  
Age \_\_\_\_\_  
Signature \_\_\_\_\_

Brother's  
Photograph

5. Sister's Name \_\_\_\_\_  
Age \_\_\_\_\_  
Signature \_\_\_\_\_

Sister's  
Photograph

Sister's Name \_\_\_\_\_  
Age \_\_\_\_\_  
Signature \_\_\_\_\_

Sister's  
Photograph

6. Name & Address of Local Guardian: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Mobile No. \_\_\_\_\_  
Signature of Local Guardian \_\_\_\_\_

Local  
Guardian's  
Photograph

8. Mobile No (1) \_\_\_\_\_  
(2) \_\_\_\_\_  
(3) \_\_\_\_\_

Date:

Signature of the Parent/Guardian

**SAINIK SCHOOL, REWA (MP)**  
**FAMILY DETAILS OF THE STUDENT - PART II**

1. Roll No. \_\_\_\_\_ Name \_\_\_\_\_

सम्पूर्ण परिवार की हाल में खीची गई फोटो  
**6"x4"** साइज की चस्पा करें  
(केवल माता, पिता, छात्र एवं सगे भाई, बहन की फोटो).

सम्पूर्ण परिवार की हाल में खीची गई फोटो  
**6"x4"** साइज की चस्पा करें  
(केवल माता, पिता, छात्र एवं सगे भाई, बहन की फोटो).

**Signature of Parent**