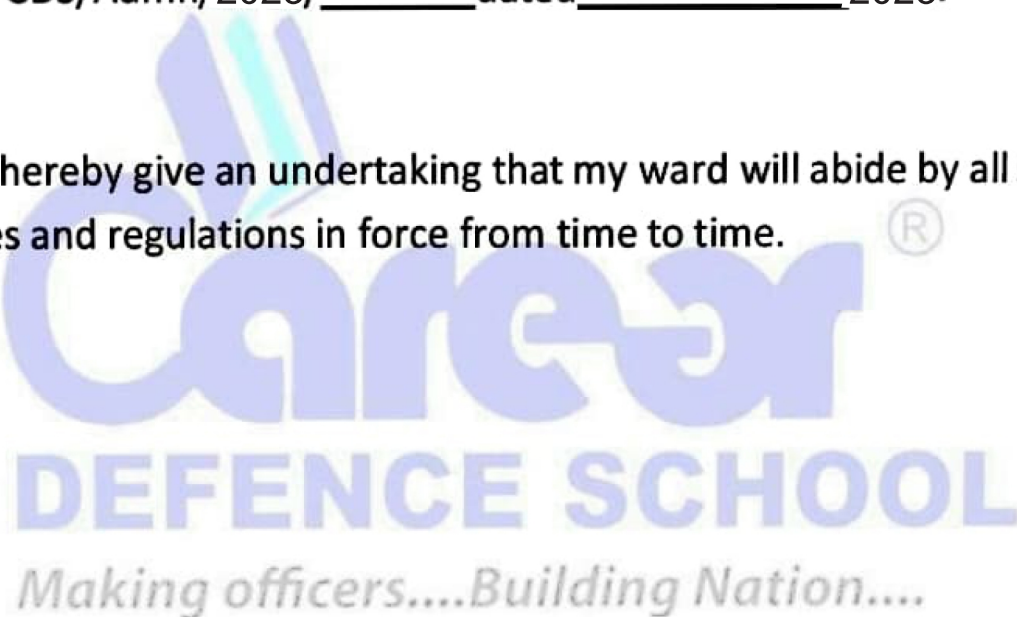


LETTER OF ACCEPTANCE OF ADMISSION OFFER

1. I hereby accept the offer of admission for my ward (Name)
_____ (Registration No. _____) in
Class _____ (2023-24) vide career defence school ambala letter
No. CDS/Admn/2023/_____ dated _____ 2023.

2. I hereby give an undertaking that my ward will abide by all school
rules and regulations in force from time to time.



Signature of Parent/Guardian:

Rank & Name:

Full Address with PIN Code:

Tele No with STD Code:

Mobile No:

APPLICATION FORM (TO BE FILLED UP IN CAPITAL LETTERS ONLY)

To

Space for
Photograph

Date ____ Apr 2020

Sir,

1. My son/daughter/ward has passed the entrance test held on 09 Feb2020 at She/he has qualified for admission in class _____ in CDS AMBALA. The particulars of my ward are asunder:-

(A)	Name (As per School Record/TC)	
(B)	Father's Name (As per School Record/TC)	
(C)	Mother's Name (As per School Record/TC)	
(D)	Guardian's Name (if parents not alive)	
(E)	Date of birth (As per School Record/TC)	
(F)	Class in which admission is desired	
(G)	Previous class passed	
(H)	Name of Previous School	
(I)	Registration No	
(J)	Aadhar No	
(K)	Category(Offr/JCO/OR/Civs)	
(L)	Identification Marks	
(M)	Any health problem	
	<ul style="list-style-type: none">• Allergic to Medicine (if any)• (ii) Blood Group	
(N)	Name & Class of brother/sister studying in CDS with School No (if any)	Name _____ Class _____ School NO _____
(O)	Full Address for communication	_____ _____ _____ E-Mail ID _____
(P)	Tele No (with STD Code)/Mob No	
(Q)	In case of Emergency(Contact Landline (with STD Code)/Mobile number)	_____ _____
(R)	Name and relation of two persons (other than parent) who can visit the child and escort him/her during leave/vacation.	(i) Name _____ Relation with the student _____ (ii) Name _____ Relation with the student _____

DETAILS OF FATHER /MOTHER (DEFENCE PERSONNEL ONLY)

2. Service No _____ Rank _____
Arms/Service _____ Present Unit _____
Place of posting _____ Last Unit _____ (in
case of Ex-serviceman) PPNO _____ (In case of Ex-
serviceman) 3. It is requested that my ward may kindly be admitted in class _____.

DECLARATION BY THE PARENT

I hereby declare that the date of birth of my son/daughter/ward and other particulars as mentioned above are correct and that I would not demand any change in them at any subsequent date.

____ Apr 2020

Signature of Parent _____

Making officers....Building Nation....

ANTI RAGGING AFFIDAVIT ON NON-JUDICIAL STAMP/e-STAMP PAPER OF RS
20/- UNDERTAKING BY 0STUDENTS

I, _____ (Roll No. _____) hereby undertake that I will not get involved in any case of ragging of the junior students. If I am found involved in any such case, I am liable to be expelled from the institute.

(Signature of Student)



UNDERTAKING BY PARENTS

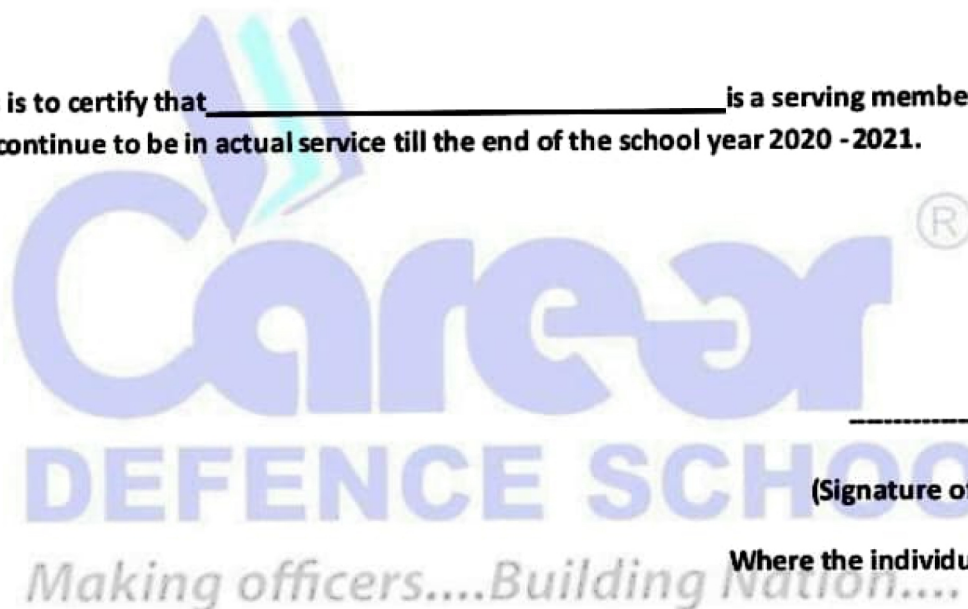
I, _____ father/mother/guardian of _____ (Roll No _____) hereby undertake that I will advise my ward not to get involved in any case of ragging of the junior students. I further undertake that if my ward is found involved in any such case, any disciplinary action as per prescribed rules may be taken against my ward.

(Signature of Parents/Guardian)

The Principal

DEFENCE PERSONNEL SERVING CERTIFICATE

This is to certify that _____ is a serving member of the defence, and will continue to be in actual service till the end of the school year 2020 - 2021.



(Signature of Commanding Officer)

Where the individual is presently posted)

Name and full address

Dated: _____

OFFICE SEAL

On Non-Judicial Stamp/e-Stamp Paper of Rs 20/-

INDEMNITY BOND

- In The Matter Of Master/Miss _____ Minor Of Whom I, Shri/Smt Am The Legal Natural Guardian Who Is Being Admitted For Studies In Career Defence School Ambala, Hereinafter Called The "School "At My Request And Keen Desire, I Indemnify The School From Any Legal Action Or Compensation And Agree That Neither Me Nor My Executors Or Administrators Or Other Legal Representative Will Make Any Claim Against The Said Or Its Principal Or Any Staff Or The Board Of Governors Or The Govt. Or Against Any Person Whatsoever In Respect Of Any Loss Or Injury To Person Or Property Including Injury Resulting In Death Which The Minor Master/Miss _____ May Suffer While The Said Student Is Admitted And Retained In The Said School For Studies Or Whilst She/he Is Boarding In The Said School. I Understand And Agree That No Compensation Or Damages Will Be Paid By The School Or By Any Officer Or Other Rank Or Employee Of The Indian Army Or Any Person In The Service Of The School Against Any Claim Which May Be Made By Any Third Party Against You Or Any-Body Else On Your Behalf Arising Out Of Any Act Or Default On The Part Of The Said Studies Including Participation In Games, Curricular Or Extra Co-Curricular Activities.
- It Is Further Declared That Stamp Duty, If Any, Payable On This Undertaking Shall Be Borne By Me.

Date: _____ The Day Of _____

Signatures of Witness

Signature: _____

Name: _____

Address: _____

Signature: _____

Signature of Guardian/Parent

Signature: _____

Name: _____

Address: _____

Countersignature

Personal Item Required

ADMISSION

THE PERSONAL ITEMS ARE LISTED BELOW: THE SCHOOL DRESS CODESCHOOL DRESS

Hanuketchers-5
Navy Blue Tracksuit (For Winters)-2
Navy Blue Turban & Patka For Sikh Students
Undergarments-5
Shoaks Pair-5
Bathrooms Slipper
Complete Swimming Costume (With Goggles Plus Cap)
T Shirts(Navy Blue)-3
Lower(Navy Blue)-3
Inner Wear
Personal Items
Shoes Polish
Shoes Brush
Bathing Soap
Hair Oil
Tooth paste
Shampoo
Cold Cream
Vaseline
CombPowder
Towels Bath Size
Hand Towels
Water Bottle
Touich With Cell
Bed Sheets Pillow
Pillow Cover
Quilt
Quilt Cover
Trunk & Suit case
Locks & Duplicate Keys
Mosquito Net
All Out/Odomos
Sports Shoes- 2 Pairs

ARTICLES PROVIDED BY SCHOOL

Books.

Bag.

Dress (School uniform and sports uniform) 2 sets.

Stationary Items.



Near Kalpi Chowk, NH-73, Kalpi, Haryana 133104. INDIA

Parents will have to provide the below-mentioned documents to complete the admission/registration process.

S.N.	DOCUMENTS REQUIRED	
1.	Photocopy of Parents/Guardian(s) Adhaar Card	
2.	Student's Original Adhaar Card	
3.	Students Date of Birth Certificate	
4.	Student or Father's/Guardian's Domicile	
5.	Original TC of the student with SR or SL number and counter sign	
6.	Photo	Student – 20 Nos.
		Father – 5 Nos.
		Mother – 5 Nos.
		Aadhar Card
		Pan Card
7.	Student or Father's Caste Certificate in case of SC, ST, OBC <i>(If parents/guardians fail to provide caste certificate, the student will be registered in general category)</i>	
8.	100 Rs. Stamp Paper (to acknowledge our Rules and Regulations)	
9.	20 Rs. or 50 Rs. Stamp (for Anti-Ragging Form)	
10.	Father's Service Certificate (If father is a defence personnel)	
11.	Income Certificate (If the income of the family is under Rs. 2 Lakh)	
12.	Student Medical Report (Format available on our website Link)	
13.	Last 3 years Mark Sheet of the student	
14.	Corona Test (RTPCR) Report	
15.	Right and Left Thumbprint of the student	
16.	Right and Left Thumbprint of Parents/Guardian(s)	
17.	Student's Signature	
18.	Parents/Guardian(s) Signature	
19.	Family Id Proof	

If the below-mentioned items will be facilitated by the school at the given cost if parents fail to avail them:

S.N.	ITEMS	COST
1.	2 Bedsheets & Pillow Cover	Rs. 800.00
2.	Shoes – No. 6 Onwards	Rs. 1000.00
	Shoes – Upto No. 5	Rs. 700.00
3.	1 Quilt (for winters)	Rs. 1500.00
4.	Covid Test (RTPCR)	Rs. 1000.00

Please bring photocopy of all documents in school for admission.

MEDICAL CERTIFICATE

PART 'A'

1. Name of candidate in full (in Block letters) _____
2. State your age and birth place _____
3. General development: Good _____ Fair _____ Poor _____
4. Height: (Without Shoes) _____ Weight _____ BMI _____
5. Body Structure: Thin _____ Average _____ Obese _____
6. Temperature: _____
7. Measurement of chest:
(a) After full expiration _____
(b) After full inspiration _____
8. Skin: Any obvious disease _____
9. Respiratory system: Does physical examination reveal anything abnormal in the respiratory organs _____
If yes explain fully _____
10. Circulatory System:
(a) Blood Pressure: Systolic _____ Diastolic _____ Heart Murmur _____
(b) ECG _____ (Attach copy)
11. Nervous System: Indication of nervous or mental disabilities _____
12. When were you last vaccinated? _____
13. Blood Group: _____
14. (a) Any Surgery in Past Two Years _____
(b) If yes details there of _____

Signature of Cadet

Signature and Stamp of
Medical Examiner / MBBS Doctor

PART 'B'

1. Eyes:

- Any disease _____
- Night blindness _____
- Defect in color vision _____
- Field of vision _____
- Visual acuity _____

Acuity of vision

Naked eye
with glasses

Strength of glass
sph. cyl. Axis

1

2

3

Distant vision

RE

LE

Near vision

RE

LE

Hypermetropia (Manifest)

RE

LE

Signature and Stamp of
Ophthalmologist

2. Ears Inspection

Hearing

(a) Right Ear

(b) Left Ear

(c) Any Infection

(d) Any other observation

3. Nose Inspection

4. Throat Inspection

Signature and Stamp of
ENT Specialist

5. Number of teeth

6. Condition of teeth

7. Condition of Gums

8. Overall oral Hygiene

Signature and Stamp of
Dental Doctor

PART – 'C'

Note: Doctor / Medical Examiner should record their findings under one of the following three categories:

- 1 Fit _____
- 1 Unfit on account of _____
- 1 Temporarily unfit on account of _____

Signature of Cadet

Signature and Stamp of
Medical Specialist