



EKLAVYA MODEL RESIDENTIAL SCHOOL

AT/PO-SARADHAPUR, LAHUNIPARA, DIST-SUNDARGARH, ODISHA, PIN-770040

(Managed by ST & SC Dev. Deptt. Govt. of Odisha)

LATERAL ENTRY REGISTRATION FORM FOR CLASS- VII, VIII & IX (2026-27)

Name of State/UT EMRS Society: OMTES Bhubaneswar

Class in which Admission is sought: _____

Session: 2026-27

Self-Attested
Passport Size
colored
Photograph

1.	Name of the Child	
2.	Date of Birth (dd/mm/yyyy)	
3.	Age as on 31.03.2026	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.	Resident of Applicant-	
	Block	
	Taluka /Tehsil	
	District	
	State	
12.	Father's Name	

13.	Mother's Name	
14.	Name of Guardian	
15.	Occupation	
	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	
21.	Family income (Annual)	
22.	Contact Number	
	Father	
	Mother	
	Guardian	
23.	Achievements, if any, in	
	Co-curricular Activities	
	Games & Sports	
	Scouts & Guides, NCC, NSS, Adventure Activities	
	Other Activities	
24.	Have you participated in Student Exchange Programme? If yes, give details.	
25.	Are you a dropout of any of EMRSs? If yes, furnish details: (only for lateral entry)	Yes/No
	Name of EMRS last studied	
	Year of Dropout	
	Reason for dropping out of EMRS	
26.	Have you ever been rusticated from any School? if Yes, furnish details.	Yes/No
	Name of School from where you were rusticated	
	Year of Rustication	
	Reason of Rustication	

27.	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.	
28.	<u>Signature(s)/Thumb impression: -</u>	
	Father/Mother/Guardian	
	Child	

Self Declaration

I, Shri./Smt/Ms
 Father/Mother/Guardian of Master/Misssubmit
 that my child/ward is.....yrs old and his/her date of Birth is as per the
 date of birth certificate.

I hereby declare that my child/ward (name) has not
 received formal education in any recognized school but have received in formal
 education and attained required competencies appropriate to his/her age in
 accordance with the syllabus prescribed by the concerned Authorities of
 State/Central Government and is eligible for Selection Test to class:.....

Signature/Thumb Impression:

Name:

Relation with the Child:

Date:

For Office use:

1.	Registration Number Allotted	
2.	Date :	
3.	Class in which admission is sought	
4.	Name of Child	
5.	Father's/Mother's/Guardian Name	
6.	Eligibility in terms of Age	Eligible/Not Eligible
7.	Documents found attached in respect of	Tick()Mark
	Date of Birth Certificate	
	Aadhar Card/ Residence Proof	
	Blood Group	
	Domicile Certificate	
	Reservation Category	
	Disability Certificate	
	Bonafide Certificate from the school currently Attending or self-declaration in case of not attending any school but studying at home/ NIOS Registration or Passing Certificate.	
	Achievement in Sports for the students to be admitted under Sports quota	
8.	Score in EMRSLT	
9.	Is the Child dropout of any of the EMRSs	
10.	Has the child ever been rusticated	
11.	Eligible for Admission or Not in case of non-eligibility, mention reason.	
12.	Signature of Dealing hand	

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	
6.	Signature of Dealing hand	

Note:

- The minimum and maximum age limit as on 31st March of the year in which admission is sought:

CLASS	MINIMUM AGE	MAXIMUM AGE
VII	11 YEARS	14 YEARS
VIII	12 YEARS	15 YEARS
IX	13 YEARS	16 YEARS

- Two years maximum age relaxation for differently abled children.