

FORM-1
(See Rule 3)

Annexure- B

Application form recognition of Primary / Secondary Schools

1.	Name of School (a) Composition of the school Boys / Girls / Co- education (b) Medium of instruction	
2.	Date of starting Working hours of the Schools	
3.	Whether Registered under the Societies Registration Act (Furnish Copy) Date:	
4.	Name and address the Management Type of the Management Gen/minority/SC and St	
5.	List of Management Committee Members	
6.	Name of the Secretary/Correspondent with Full address Telephone Fax:	
7.	Whether the Management is running any other institutions. If so furnish the list	
8.	Financial position of the Management (enclose audit report of he last three years) (a) furnish details of stability fund (b) furnish details of fees/donations or any other amount collected	
9.	Aided or unaided (If aided enclose a copy of the G.O.) (a) whether permitted by the Government	
10.	If any subject or activity that is not included in the curricular is prescribed If so details.	

11.	Class or Classes to be recognized				
	Nomenclature	No. of Pupils of the date of application in each class/section	Average attendance during the month		
	I				
	II				
	III				
	IV				
	V				
	VI				
	VII				
	VIII				
If the additional sections have been sanctioned enclose copy of the order					
12.	Year of latest recognition obtained (enclose a copy.....)				
13.	Staff Particulars				
Sl. No.	Name of the Teacher	Date of Birth	Qualification	Date of entry into service	Whether approved or not
1	2	3	4	5	6
14.	Accommodation (enclose copy) (a) Total area of the school buildings (i) No. of rooms / size (ii) Rented or own (b) Total area of playground (c) Toilet provided or not both for staff and Students (d) Electricity facility available or not (e) Whether the special provision is made in the school building for disabled, children to				
15.	Drinking water facility provided or not		Yes / No		
16.	Library _ (a) No of Book set: (b) Approximate value				

17.	A.V. aids Furnish the list	
18.	Sports and Games furnish the list	
19.	Laboratory facilities	Available / Not Available
20.	Co-curricular activities provided	
21.	Furnish Annual Public Examination results of the last three years	
22.	Any unique features of the school	

Note: (Enclose copies of relevant G.O's / records whether applicable)

Date:

Place:

Signature of the
Secretary / Correspondent
With seal.