

PART B: STUDENT DETAILS

4.1 GENERAL INFORMATION OF STUDENT (GENERAL PROFILE) Academic Year : 2022-23

a) UDISE Code of School :

b) Name of School :

c) GRADE/CLASS :

d) SECTION(Mention 'A' if there are only 1 Section) :

4.1.1 Name of the Student (in Capital Letters) :			
4.1.2 Gender :	M <input type="checkbox"/> F <input type="checkbox"/> Transgender <input type="checkbox"/>	M <input type="checkbox"/> F <input type="checkbox"/> Transgender <input type="checkbox"/>	M <input type="checkbox"/> F <input type="checkbox"/> Transgender <input type="checkbox"/>
4.1.3 Date of Birth:			
4.1.4 Mother's Name :			
4.1.5 Father's Name :			
4.1.6 Guardian's Name :			
4.1.7 Aadhaar Number of Child :			
4.1.8 Name of Student as per Aadhaar Card :			
4.1.9 (a) Address :			
4.1.9 (b) Pincode :			
4.1.10 (a) Mobile Number (Parent/ Guardian) :			
4.1.10 (b) Alternate Mobile Number (Parent/ Guardian) :			
4.1.11 Contact email-id (of Student/Parent/Guardian) :			
4.1.12 Mother Tongue of the Child :	Hindi-42, Pahari-62, English-200:	Hindi-42, Pahari-62, English-200:	Hindi-42, Pahari-62, English-200:
4.1.13 Social Category :	General-1, SC-2, ST-3, OBC-4:	General-1, SC-2, ST-3, OBC-4:	General-1, SC-2, ST-3, OBC-4:
4.1.14 Minority Group :			
Minority Group : (Muslim -1, Christian-2, Sikh-3, Buddhist-4, Parsi-5, Jain-6, Not Applicable-7)			
4.1.15 Whether BPL beneficiary?	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>
If 1-Yes, then (a) Whether Antyodaya Anna Yojana (AAY) beneficiary?:	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>
4.1.16 Whether belongs to EWS / Disadvantaged Group?	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>
4.1.17 Whether CWSN?	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>
If Yes, (a) Type of impairment (code):			
Type of Impairment :1-Blindness, 2-Low-Vision, 3-Hearing impairment, 4-Speech and Language,5- Locomotor Disability, 6-Mental illness, 7-Specific Learning Disabilities, 8-Cerebral palsy, 9-Autism Spectrum Disorder, 10-Multiple Disability incl. deaf, blindness, 11-Leprosy Cured students, 12-Dwarfism, 13-Intellectual Disability, 14-Muscular Dystrophy, 15-Chronic Neurological conditions, 16-Multiple Sclerosis, 17-Thalassemia, 18- Haemophilia, 19-Sickle Cell disease, 20-Acid Attack victim, 21-Parkinson's disease			
4.1.18 Whether the Child is Indian National?	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>
4.1.19 Is this Child identified as Out-of-School-Child in current or previous years?	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>
If Yes, (a) when the child is mainstreamed?	In current academic year <input type="checkbox"/> , In earlier AC Year <input type="checkbox"/>	In current academic year <input type="checkbox"/> , In earlier AC Year <input type="checkbox"/>	In current academic year <input type="checkbox"/> , In earlier AC Year <input type="checkbox"/>

4.2 ENROLMENT DETAILS OF STUDENT IN PRESENT SCHOOL FOR CURRENT YEAR

4.2.1 Admission Number in School:			
4.2.2 Admission Date (DD/ MM/ YYYY) in Present Class:			
4.2.3 Academic Stream opted by student For Hr. Secondary Classes only	Art <input type="checkbox"/> , Science <input type="checkbox"/> , Commerce <input type="checkbox"/>	Art <input type="checkbox"/> , Science <input type="checkbox"/> , Commerce <input type="checkbox"/>	Art <input type="checkbox"/> , Science <input type="checkbox"/> , Commerce <input type="checkbox"/>
4.2.4 (a) Status of student in Previous Academic Year of Schooling(2021-22) :	Studied at Current/Same School <input type="checkbox"/> , Studied at Other School <input type="checkbox"/> , Anganwadi/ ECCE Centre <input type="checkbox"/> , None/Not Studying <input type="checkbox"/>	Studied at Current/Same School <input type="checkbox"/> , Studied at Other School <input type="checkbox"/> , Anganwadi/ ECCE Centre <input type="checkbox"/> , None/Not Studying <input type="checkbox"/>	Studied at Current/Same School <input type="checkbox"/> , Studied at Other School <input type="checkbox"/> , Anganwadi/ ECCE Centre <input type="checkbox"/> , None/Not Studying <input type="checkbox"/>
4.2.4 (b) Grade/Class Studied in the Previous/Last Academic Year (2021-22) : (Fill if Answer of 4.2.4(a) is Option 1 or 2)			
4.2.5 Admitted / Enrolled Under (Only for Pvt. Unaided): (0- None, 1-Section 12 of the RTE, 2-EWS, 3-Persons with Disabilities (PwD), 4-Disadvantaged Group, 5-Others)			
4.2.6 (a) In the Previous class studied – whether appeared for examinations :	1-Appeared <input type="checkbox"/> , 2- Not Appeared <input type="checkbox"/>	1-Appeared <input type="checkbox"/> , 2- Not Appeared <input type="checkbox"/>	1-Appeared <input type="checkbox"/> , 2- Not Appeared <input type="checkbox"/>

4.2.6 (b) In the previous class studied – Result of the examination : Option in case of 1-Appeared in Examinations	1-Promoted/Passed <input type="checkbox"/> , 2-Promoted/Passed with grace <input type="checkbox"/> , 3-Detained/Repeater/Not Passed <input type="checkbox"/> , 4-Promoted /Passed without Examination <input type="checkbox"/>	1-Promoted/Passed <input type="checkbox"/> , 2-Promoted/Passed with grace <input type="checkbox"/> , 3-Detained/Repeater/Not Passed <input type="checkbox"/> , 4-Promoted /Passed without Examination <input type="checkbox"/>	1-Promoted/Passed <input type="checkbox"/> , 2-Promoted/Passed with grace <input type="checkbox"/> , 3-Detained/Repeater/Not Passed <input type="checkbox"/> , 4-Promoted /Passed without Examination <input type="checkbox"/>
4.2.6(c) Option in case of 1-Appeared in Examinations In the previous class studied - % of overall marks obtained in the examination			
4.2.7 No. of days child attended school (in the previous academic year) :			

4.3 FACILITY AND OTHER DETAILS OF THE STUDENT

4.3.1 (a) Facilities provided to the student (for the year of filling data)(Yes-1, 2-No) (For Govt. and Govt. Aided Schools Only)	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/> If yes; Free Text Book <input type="checkbox"/> Free Uniforms <input type="checkbox"/> Free Transport facility <input type="checkbox"/> Free Escort <input type="checkbox"/> Free By Cycle <input type="checkbox"/> Free Mobile/ Tablet/ Computer <input type="checkbox"/> Free Hostel <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/> If yes; Free Text Book <input type="checkbox"/> Free Uniforms <input type="checkbox"/> Free Transport facility <input type="checkbox"/> Free Escort <input type="checkbox"/> Free By Cycle <input type="checkbox"/> Free Mobile/ Tablet/ Computer <input type="checkbox"/> Free Hostel <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/> If yes; Free Text Book <input type="checkbox"/> Free Uniforms <input type="checkbox"/> Free Transport facility <input type="checkbox"/> Free Escort <input type="checkbox"/> Free By Cycle <input type="checkbox"/> Free Mobile/ Tablet/ Computer <input type="checkbox"/> Free Hostel <input type="checkbox"/>
4.3.1 (b) Scholarship Received by Student (i) Central Scholarship	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/> If yes; Central scholarships code:	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/> If yes; Central scholarships code:	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/> If yes; Central scholarships code:
Name and Code of Central Scholarships 1- Pre Matric Scholarships Scheme for Minorities (MoMA), 2- Post Matric Scholarships Scheme for Minorities (MoMA), 3- BEGUM HAZRAT MAHAL NATIONAL SCHOLARSHIP (MoMA), 4- Pre-matric Scholarship for Students with Disabilities (DEPwD), 5- Post-matric Scholarship for Students with Disabilities (DEPwD), 6- Post Matric Scholarship for SC students (All States) (MoSJE), 7- Pre Matric Scholarship for SC students for Class IX and X(All States) (MoSJE), 8- Financial Assistance for Education of the Wards of Beedi/Cine/IOMC/LSDM Workers - Post-Matric (MoLE), 9- Financial Assistance for Education of the Wards of Beedi/Cine/IOMC/LSDM Workers - Pre-Matric (MoLE), 10- National Means Cum Merit Scholarship (DoSEL), 11- Prime Minister's Scholarship Scheme For Central Armed Police Forces And Assam Rifles, 12- Prime Minister's Scholarship Scheme for wards of States/UTs Police Personnel Martyred during Terror/Naxal Attacks, 13- Prime Minister's Scholarship Scheme For RPF/RPSF, 14- Financial Support to the students of NER for Higher Professional Courses(NEC MERIT SCHOLARSHIP), 15- Other Central Scholarships			
(ii) State Scholarship:	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>
(iii) Other Scholarship:	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>
If anyone of above is YES-1 then Scholarship Amount (per annum):			
4.3.2 Facilities provided to Student in case of CWSN (for the year of filling data) (Yes-1, No-2) (For Govt. Only)			
1. Braille Book; 2. Braille Kit; 3. Low Vision; 4. Kit Hearing Aid; 5. Braces; 6. Crutches; 7. Wheel Chair; 8. Tri-cycle; 9. Caliper; 10. Escort; 11. Stipend; 12. Other			
4.3.3 Whether child has been screened for Specific Learning Disability (SLD):	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>
If Yes-1, 4.3.3 (a) Specify the type of SLD:	(Dysgraphia-1, Dyscalculia-2, Dyslexia-3):	(Dysgraphia-1, Dyscalculia-2, Dyslexia-3):	(Dysgraphia-1, Dyscalculia-2, Dyslexia-3):
4.3.4 Whether child has been screened for Autism Spectrum Disorder (ASD)?	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>
4.3.5 Whether child has been screened for Attention Deficit Hyperactive Disorder (ADHD)?	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>
4.3.6 Is the student involved in any extracurricular activity?	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>
4.3.7 (a) Has the student been identified as a gifted / talented child in	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>
Please tick over subject if yes	Mathematics; Language; Science Technical; Sports; ART;	Mathematics; Language; Science Technical; Sports; ART;	
If anyone or more of 4.3.7 (a) is 1-YES then	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>
(b) Whether provided mentors?	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>
(c) Whether the student participated in nurturance camps	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/> If yes (i) State (ii) National Level	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/> If yes (i) State (ii) National Level	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/> If yes (i) State (ii) National Level
(d) Has the student appeared in State Level Competitions/ Olympiads/National level Competitions?	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>
(e) Does the child participate in NCC/ NSS/ Scouts and Guides?	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>	Yes-1 <input type="checkbox"/> No-2 <input type="checkbox"/>