REGISTRATION OF CANDIDATES

Login Authority : PARENT [7568350575]

School belongs to which State/UT and District:*

Name of the Candidate:*	Mother's Name : *
Candidate Name	Mother's Name
Father's Name : *	Guardian's Name :
Father's Name	Guardian's Name
Whose Signature will be Uploded:*	Upload Full Signature : *
Select	Browse No file selected.
	(Size should be less than 50 KB)
Admission Class:*	Date of Birth:*
VI	Date of Birth
Study Continuance Status:*	Mother Tongue:*
Select	Select
Gender:*	Caste:*
Select v	Select
	(Original certificate to be submited for verification at the time of admission, If selected)
Religion:*	
Select	
Aadhar No. of the Candidate : *	Aadhar No of the Father :
Aadhar No. of the Candidate	Aadhar No of the Father
Aadhar No of the Mother :	Aadhar No of the Guardian :
Aadhar No of the Mother	Aadhar No of the Guardian
Whether Coming under PWD Category:*	
Select	
Whether Father of the Candidate is a OMC Employee : *	
Select v	
(Original certificate from the Employer to be submitted for verification at the time of admission, If selected)	
Whether Mother of the Candidate is a OMC Employee:*	
Select	
(Original certificate from the Employer to be submitted for verification at the time of admission, If selected)	
Whether the candidate is suffering from any chronic/ serious disease : *	
Select	
Category of school in which the candidate is/was studying:*	Whether the school has recived COR from the Competent Authority? : *
Select	Select
(Certificate issued from the concerned DEO/BEO regarding category of school has to be submitted at the time of admission, If selected)	(Candidate has to submit the COR certificate at the time of admission, if selected)
Name of the school in which the candidate is/was studying : *	Address of the School : *

Contact No of the Parent(s):*	E-mail Id of the Parent(s) :
Contact No of the Parent(s)	E-mail Id of the Parent(s)
Annual Income of the Parent: *	
Annual Income of the Parent	
Both Address Same □	
Permanent address	Correspondence address
Village/ Town Situated in : *	Village/ Town Situated in : *
AT	AT
РО	PO
District:*	District:*
Select	∨ Select ∨
Location:*	Location:*
Select	∨ Select ∨
Name of the Block/NAC/ Muncipality/ Municipal Corporation : *	Name of the Block/NAC/ Muncipality/ Municipal Corporation : *
Select	v Select v
Name of the OMC Mining Region : *	Pincode:*
Select	Pincode
Name of the Peripheral Village : *	
Select	•
Pincode:*	
Pincode	
Eligible OMAV for taking Admission : *	
Select	~
Are you a permanent resident of state of odisha:*	
Select	V
(This should be in accordance with the residence certificate of the candidate) (Original certificate to be submited for verification at the time of admission, If selected)	
Upload Passport Size Photo of the Candidate : * Browse No file selected.	Upload Full Signature of the Candidate : * Browse No file selected.
(Size should be less than 50 KB)	(Size should be less than 50 KB)
	Save