THE AIR FORCE SCHOOL
SUBROTO PARK, NEW DELHI - 110010
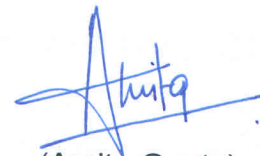
TAFS/15/ADM   **CIRCULAR**   JAN 2024

Dear Parent,

1.   Under Sarv Shiksha Abhiyan, Govt Collects student's data from the School in the online Module/Website developed by National Informatics centre (NIC), Ministry of Electronics & information Technology thorough the Online Module/Website "District Information System for Education PLUS (UDISE+)

2.   All the fields are mandatory to fill in the UDISE portal of all the students. Further action like promoting or marking TC of students in UDISE portal can be done only once the information of the student is completely filled in the UDISE portal.

3.   This is a time bound process and needs to be completed with in the stipulated time. Hence, you are requested to fill the attached proforma and submit to the class teacher by 15 Jan 2024 positively for further necessary action by the school.

4.   Please accord priority & submit duly filled form within the given time frame.

(Amita Gupta)
Principal

DETAILS OF STUDENT FOR UPDATING IN UDISE PORTAL

2023-24

1. Adm No. ……………2. Name of Student …………………………………………………..

3. Class/Sec : …..-……4. Gender : ……5. Date of Birth (dd/mm/yyyy) : …… / …… / ………

6. Aadhar No of Student :__ __ __ __ __ __ __ __ __ __ __ __

7. Student Name as per Aadhar …………………………………………….

8. Blood Group ……………… 9. Mother Tongue of the Student : …………………

10. Social Category (SC / ST / OBC / General) : ……………

11. Is Student under CWSN Category (Yes / No) : ……………

If Yes, 11 (a) Name of Disability …………………………

      11(b) Percentage of Disability: ……………………

12. Is Central Scholarship Received in the last academic year (Yes / No) : ……………

If Yes, 12 (a) Name of Scholarship …………………………………………..

      12 (b) Amount of Scholarship ……………

13. Is state Scholarship Received in the last academic year (Yes / No) : ……………

If Yes, 13 (a) Name of Scholarship …………………………………………..

      13 (b) Amount of Scholarship ……………

14. Any other scholarship Received in the last academic year (Yes / No) : ……………

If Yes, 14 (a) Name of Scholarship …………………………………………..

      14 (b) Amount of Scholarship ……………

15. Whether Student has been screened for Specific Learning Disability (SLD) (Yes / No) :

……..

If Yes, 15 (a) Type of SLD (Dysgraphia, Dyscalculia, Dyslexia) : …………………………

16. Whether Student has been screened for Autism Spectrum Disorder (ASD)?

(Yes / No) : …………

17. Whether Student has been screened for Attention Deficit Hyperactive Disorder (ADHD)?

(Yes / No) : …………

18. Is the student involved in any extracurricular activity? (Yes / No) : …………

19. Does the Student participate in NCC (Yes / No) ……………

20. Whether student is capable of handling digital devices including the internet?

(Yes / No) ……………

21. Student's Height (in CMs) ……………   22. Student's Weight (in KGs) ……………..

Date _ _ / _ _ / _ _ _ _   Signature of Father/Mother …………………………….

                                 Name of Father/Mother ……………………………….