

DEPARTMENT OF SCHOOL EDUCATION

STUDENT DATA CAPTURE FORMAT

1	School code	U-Dise code to be adopted
2	Name of Student	
3	DOB	dd/mm/yyyy
4	Gender	Boy / Girl
5	Class	
6	Medium	
7	Group Code (for HSC only)	
8	Nationality	<input type="checkbox"/> INDIAN <input type="checkbox"/> OTHERS
9	Religion	<input type="checkbox"/> HINDU <input type="checkbox"/> MUSLIM <input type="checkbox"/> CHRISTIAN <input type="checkbox"/> OTHERS
10	Community	<input type="checkbox"/> SC-Arunthathiyar <input type="checkbox"/> SC -Others <input type="checkbox"/> ST <input type="checkbox"/> MBC <input type="checkbox"/> BC- Muslim <input type="checkbox"/> BC- Others <input type="checkbox"/> OC- Other Communities
11	Sub caste	
12	Mother Tongue (tic ✓ appropriate)	TAMIL/TELUGU/MALAYALAM/KANNDAM/OTHERS
13	Mother's name	
14	Mother's occupation (tic ✓ appropriate)	Govt / Private / Agriculture / Self-employed / Daily wages
15	Mother's monthly income Rs.	
16	Father's name	

17	Father's occupation (tic ✓ appropriate)	Govt / Private / Agriculture / Self-employed / Daily wages
18	Father's monthly income Rs.	
19	If differently-abled – type of disability (tic ✓ appropriate)	Ortho / Blind / Deaf
20	If belongs to disadvantaged group (tic ✓ appropriate)(Ref: G.O. Ms.No.180 Dt. 15-11-2011.)	Orphan / HIV Affected / Transgender / Child of a Scavenger
21	House address with pin-code	
22	Native district	
23	Student id	Will be auto-generated
24	Photo	
25	Attendance status	Regularly present / Long absent
26	Sports participation	Block / District / Division / State / National level
27	Contact Phone Number	
28	Blood Group	

29 Brothers' Details

S.No.	Name	DOB	Qualification	Whether Employed (Yes/No)
1.				
2.				
3.				
4.				

30 Sisters' Details

S.No.	Name	DOB	Qualification	Whether Employed (Yes/No)
1.				
2.				
3.				
4.				

Signature of the Headmaster / Principal with Seal

Signature of Parent