

**ANNEXURE – II**

**Self-Declaration Format**

I \_\_\_\_\_, Father/Mother of Master/Miss  
\_\_\_\_\_ age \_\_\_\_\_ years, resident of  
\_\_\_\_\_ (complete address), do hereby declare that  
the distance of my home from KV DBN Shikar (BSF) is \_\_\_\_\_ (KM)

I am well aware of the fact that if the information given by me is proved false / not true at any point of time, admission will be cancelled and I will be liable to legal actions as per guidelines of KVS and any benefit accrued by me or my ward shall be summarily cancelled.

Date:-

Place:

Signature of the Parent/Guardian