

School Details Change Format

Form A01

State :

Date of request generate :

UDISE+ District :

File /Record No:

UDISE+ Block :

(For District/Block Office Use)

UDISE CODE :

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School Name :

✓ Check the parameters from below grid which needs to be updated

Update Request By : ☐ State Level ☐ District Level ☐ Block Level

<input type="checkbox"/> School Name (New)			
	OLD	NEW	Reason
<input type="checkbox"/> School Status			
<input type="checkbox"/> School Management			
<input type="checkbox"/> School Type			
<input type="checkbox"/> School Category			
<input type="checkbox"/> Pre Primary Section (1-Yes, 2-No)			
<input type="checkbox"/> Number of Levels/Classes in Pre Primary Section			
<input type="checkbox"/> Class From (Lowest class)			
<input type="checkbox"/> Class To (Highest class)			
<input type="checkbox"/> Stream (for school having higher secondary schools)	<input type="checkbox"/> Arts <input type="checkbox"/> Commerce <input type="checkbox"/> Science <input type="checkbox"/> Vocational <input type="checkbox"/> Others	<input checked="" type="checkbox"/> Arts <input type="checkbox"/> Commerce <input type="checkbox"/> Science <input type="checkbox"/> Vocational <input type="checkbox"/> Others	

***Attach Recognition certificate for any change in case of Private Schools**

☐ I hereby certify that the above change request of the school, along with their essential documents. If any parameter found incorrect then, I would be responsible for future aftermath.

(Signature) :

Official Seal :

Name :

Designation :

(Education Officer or Equivalent)

Date

Contact No :

Common Instructions

School Status :

(0= Operational / 1. Closed / 2. Merge / 3. Sanctioned but not Operational / 4. DCF Not Received/ 5. Permanent Closed)

School Category : Refer DCF for the particular STATE

School Management : Refer DCF for the particular STATE

School Type : (1= Boys / 2. Girls / 3. Co-educational)

Pre Primary : (1= Yes / 2. No)

NOTE : (1). Private Schools require Recognition Certificate in order to do any changes.

(2). Entries are must in above tables. Put **XXXX** where there is no changes required

Format for Student ADDITION in UDISE+ for Class-2 to Class-12 at Block/District*(For the Students whose PROFILE was not created/missing in UDISE Student List of 2022-23)**(to be Submitted to Block/District Education Officer or Equivalent)*

UDISE Code: _____ School Name: _____

_____ UDISE Block: _____ District : _____

SI No	Class & Section	Students Particulars (Mention M for Male, F for Female) (DOB in DD/MM/YYYY)	Parent Details	Reason why Student was NOT Added in 2022-23
		Name : Gender: DOB:	Father : Mother :	
		Name : Gender: DOB:	Father : Mother :	
		Name : Gender: DOB:	Father : Mother :	
		Name : Gender: DOB:	Father : Mother :	
		Name : Gender: DOB:	Father : Mother :	
		Name : Gender: DOB:	Father : Mother :	
		Name : Gender: DOB:	Father : Mother :	
		Name : Gender: DOB:	Father : Mother :	
		Name : Gender: DOB:	Father : Mother :	
		Name : Gender: DOB:	Father : Mother :	
		Name : Gender: DOB:	Father : Mother :	
		Name : Gender: DOB:	Father : Mother :	
		Name : Gender: DOB:	Father : Mother :	

Head of the School Details

Signature:

Name:

Seal:

Block Education Officer or Equivalent

Signature:

Name:

Designation:

Seal:

Form S03/UDISE

**Format for STUDENT Name Change, Class Change and other Basic Details Change in
UDISE+ SDMS**

(to be Submitted to Block/District Education Officer or Equivalent)

Submitted By

UDISE Code: _____ School Name: _____


UDISE Block: _____ District : _____

For

Student's 11 Digit National ID : _____

Student's Current Name : _____ Student's Class: _____

Choose Options from Below where Changes are required:

Change required in	[v] Tick if Changes required	OLD PARTICULARS	NEW PARTICULARS
NAME		OLD NAME: 	NEW NAME:
DATE OF BIRTH (DOB)		OLD DOB:	NEW DOB:
GENDER		OLD GENDER:	NEW GENDER:
AADHAAR		OLD AADHAAR:	NEW AADHAAR:
NAME AS PER AADHAAR		OLD NAME AS PER AADHAAR:	NEW NAME AS PER AADHAAR:
CLASS & SECTION		OLD CLASS AND SECTION:	NEW CLASS AND SECTION:

Head of the School Details:

Signature:

Name:

Designation:

Seal:

Details of Block Education Officer or Equivalent:

Signature:

Name:

Designation:

Seal:

Form T01/UDISE

Format for Teacher's Basic Details Change in UDISE+ Teacher Database
(to be Submitted to District MIS Incharge or Equivalent)

Submitted By

UDISE Code: _____ School Name: _____

UDISE Block: _____ District : _____

For

National Teacher Code: _____

Teacher's Current Name : _____ Teacher's DoB : _____

Particulars where Changes are required:

(Appropriate Proof of Identity(PoI) to be submitted along with change requests)

Changes required in	[V]Tick if Changes required	OLD PARTICULARS	NEW PARTICULARS
Name		Old Name:	New Name:
Gender		Old Gender:	New Gender:
Date of Birth		Old Date of Birth:	New Date of Birth:
Date of Joining Service		Old Date of Joining:	New Date of Joining:
AADHAR		Old AADHAR:	New AADHAR:
Name as on AADHAR			Name as on AADHAR:

*Please attach the appropriate documentary proof to justify the change.

Concern Teacher's Detail**Head of School Details**

Signature:

Name :

Designation:

Date:

Signature:

Name :

Designation:

Seal: