




State Council of Educational Research and Training, Delhi
SCERT Delhi Application Forms 2024
Confirmation Page



Personal Details			
Registration Number	241150520361	Candidate's Name	SALONI
Father's Name	SUNIL KUMAR	Mother's Name	SANTOSH
Date of Birth	30-03-2002	Gender	Female
Category	Other Backward Class (OBC)	State from where passed 12th Qualifying Exam	Outside Delhi



Sub Category List			
Person with Disability	No		
Ward of Ex-Service Defence Personnel	No		
Muslim Minority	No		
National Cadet Corps	No		
Sports Person	No		
Ward of DELHI DIET/SCERT Employees	No		
Ward of Delhi School Teacher	No		
Other Details			
Whether you need scribe during CBT ?			
SCERT Ward Certificate Number			
Ward Certificate Issued Date (DD-MM-YYYY)			
Other Informations			
Do you want Urdu or Punjabi as Teaching Subject?	No		
Qualification Details			
Class 10th or Equivalent Details			
Passing Status	Passed		
Passing Year	2018		
Board	CENTRAL BOARD OF SECONDARY EDUCATION		
Roll Number	2201282		
Pincode	125055		
Result Mode	Percentage		
Maximum Marks	600		
Obtained Marks	513		
Percentage Marks	85.5		
Class 12th or Equivalent Details			
Passing Status	Passed		
Passing Year	2020		
Board	CENTRAL BOARD OF SECONDARY EDUCATION		
Roll Number	17690635		
Pincode	125055		
Subject/Year/Semester Wise Marks Details			
Name	Passing Status	Total Max	Total Obtained
English	Passed	100	90
Physics	Passed	100	78
Chemistry	Passed	100	66
Music	Passed	100	79
Physical Education	Passed	100	92
Subject/Year/Semester Max Marks : 500 Subject/Year/Semester Obtained Marks: 405 Subject/Year/Semester Percentage: 81			
Apply For Details			
Sr.No.	Discipline		
1	D.El.Ed		
Exam Center List			
State Name.	Exam Center Name	Exam Center Choice No.	
Delhi (NCT)	Delhi	1	
Contact Details			
Correspondence Address			
Premises No./Village Name	H NO D-838/29 AMAR COLONY		
Sub Locality/Colony/Police Station(Optional)	EAST GOKALPUR		
Locality/City/Town/Village/Post Office	SHAHDARA		
Country	India		
State	Delhi (NCT)		
District	NORTH EAST DELHI		
Pin Code	110094		



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Mobile Number	805****649	
Email Id	kas*****com	
Permanent Address		
Premises No./Village Name	H NO D-838/29 AMAR COLONY	
Sub Locality/Colony/Police Station(Optional)	EAST GOKALPUR	
Locality/City/Town/Village/Post Office	SHAHDARA	
Country	India	
State	Delhi (NCT)	
District	NORTH EAST DELHI	
Pin Code	110094	
Fee Payment Details		
Registration Fee Payment		
Transaction Number	Transaction Amount	Transaction Date
11000219693464	250	14/05/2024 22:32:58
Registration Details		
Activity	Date & Time	IP Address
Registration Form Submission	May 14 2024 10:08PM	47.31.215.3
Application Form Submission	May 14 2024 10:26PM	47.31.215.3
Uploaded Documents		
Photograph		
Signature		
Declaration		
I hereby declare that all the particulars given by me in this form are true to the best of my knowledge and belief. Any mistake / misinformation, detected at the time of admission or at any stage in future, will result in the cancellation of admission. I have read the information bulletin carefully and understood all the procedures.		

I hereby agree to the following terms and conditions governing the admission process 2024 of SCERT, Delhi:

1. I have gone through and understood the process of online admission process and read all the instructions and guidelines available in the prospectus 2024 on <http://www.scertdelhiadmission.nic.in/> website.
2. I know that during verification of documents, if any discrepancy is detected in original documents, category, reservations, state of eligibility, gender, then SCERT, Delhi is free to take appropriate decision regarding continuation or cancellation of my candidature in accordance with prospectus of admission process 2024.
3. I know that choices/preferences of DIETs/Institutes will be automatically locked by the system on the last specified date if they are not locked by me.
4. I know that the personal information provided by me is genuine and authentic.
5. I am aware that certain participating Institutes (DIETs/Institutes) have additional restrictions (with regard to admission) on gender and minimum marks in qualifying exam, reservation for specific category etc. I understand that if I fail to fulfill the conditions, my candidature to that institute is liable to be cancelled for which I will be personally responsible.
6. I agree to the following clause (applicable for persons with disability candidates) “Persons with



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disability (PwD) candidates should exercise their choice of DIETs/Institution depending upon the nature of their physical disability. Final admission is subject to the condition that the candidate is capable of carrying out all activities related to theory and practical work as applicable to the course without any special concessions and exemptions”.

Signature of Candidate
(SALONI)