

(For the students studying in Class VIII)

You may take the help of your teacher/parent for filling up the application form.

- Name & Address of the Agency for conducting the NMMS Examination:

MANIPUR
(regular student)

- Application fee, if any: NIL

Affix Passport size
photograph duly attested
by the Head of the
Institution

State Level 12 digit Roll Number

Scheme Code		State Code		Years		Centre Code (to be filled by the Officer)			Serial No.			Class		Date of Birth (DD-MM-YY) (as recorded in Aadhaar)							
0	3	1	3	2	5							0	8								

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|----|--|------------------------|------------------------------------|------------------------|------------------------|------------------------|--------------------------------|------------------------|------------------------|------------------------|-----------------------------------|------------------------|------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 1. | Name of the Candidate (as recorded in Aadhaar) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. | Father's Name (Do not write Mr./Dr./Prof) (as recorded in Aadhaar) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. | Mother's Name (Do not write Mrs./Dr./Prof) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. | Sex | | 5. Area to which candidate resides | | | | 6. Caste Category of Candidate | | | | 7. Disability status of candidate | | | | | | | | | | | | | | | | | | | |
| | <input type="text"/> 1 | <input type="text"/> 2 | <input type="text"/> 1 | <input type="text"/> 2 | <input type="text"/> 1 | <input type="text"/> 2 | <input type="text"/> 3 | <input type="text"/> 4 | <input type="text"/> 5 | <input type="text"/> 1 | <input type="text"/> 2 | <input type="text"/> 3 | <input type="text"/> 4 | | | | | | | | | | | | | | | | | |
| | Male | Female | Rural | Urban | General | SC | ST | OBC-M | OBC-MP | Orthopaedic | Hearing Impaired | Visually Impaired | None | | | | | | | | | | | | | | | | | |

(Please enclose a copy of the relevant reservation certificate in support of the information at Sl. No. 6 & 7)

- [illegible]

(Please refer to instructions 6 and 7 on page 2 for Sl. No. 13 and 14)

15. Annual Income **(Proof of income to be enclosed compulsorily)**
- | | | | | |
|-------------------------------|---|---|--|--|
| a) Father | <div>1</div> <div>Upto Rs. 50,000</div> | <div>2</div> <div>Rs. 50,001 to Rs. 100,000</div> | <div>3</div> <div>Rs. 100,001 to 150,000</div> | <div>4</div> <div>Rs. 150,001 to Rs. 350,000</div> |
| b) Mother | <div>1</div> <div>Upto Rs. 50,000</div> | <div>2</div> <div>Rs. 50,001 to Rs. 100,000</div> | <div>3</div> <div>Rs. 100,001 to 150,000</div> | <div>4</div> <div>Rs. 150,001 to Rs. 350,000</div> |
| c) Total income of the family | <div>1</div> <div>Upto Rs. 50,000</div> | <div>2</div> <div>Rs. 50,001 to Rs. 100,000</div> | <div>3</div> <div>Rs. 100,001 to 150,000</div> | <div>4</div> <div>Rs. 150,001 to Rs. 350,000</div> |

[illegible]

To be filled by the Head of the Institution

Certified that :

- (1) Master/Miss is a regular student of this School/Institution and he/she has secured ☐ ☐ % mark in the class VII annual promotion examination i.e. when he/she was promoted from Class VII to Class VIII. He/She has secured mark out of **(Candidate must fulfill the criteria announced by the State & enclose a photocopy of progress report)**
- (2) The particulars given by him/her in the application form have been verified and found in order.
- (3) Master/Miss belongs to Scheduled Caste/Scheduled Tribe/OBC/Disability category as per the records maintained in the Institution. (to be filled for SC/ST/OBC/PCG candidate only) **(Please enclose SC/ST/OBC/Disability certificate)**
- (4) Master/Miss belongs to economically weaker section (income not exceeding Rs. 3,50,000 p.a.) **(Please enclose income certificate of parents issued by the Competent Authority)**

Date

.....
Signature of the Head of the Institution
With seal

.....
(Signature of the Candidate)

.....
(Signature of the District Liaison Officer)
With seal

.....
Counter-signature of the Zonal
Education Officer (with seal)

CODING PLAN

Read Instructions carefully before filling up the Application Form

1. Use only Blue or Black Ball Point Pen. WRITE IN CAPITAL LETTERS. Do not mark or write outside the boxes.
2. Leave one box blank between two words. Limit your name and / or address within the space provided for it. Please see example as given below

EXAMPLE FOR WRITING NAME AND ADDRESS :

Father's Name

P C H A O B A S I N G H

POSTAL ADDRESS : Do not try to write complete address in one line. Break it appropriately as shown below.

U R I P O K I M P H A L

3. Cross (X) only one of the appropriate boxes in item nos. 4, 5, 6, 7, 10, 11, 15.
4. It is the responsibility of the candidate and the Head of the Institution to deposit the filled-in Application Form to the District Liaison Officer Concerned before the last date. **No request for condoning delay in submission will be entertained whether it is due to the fault of the candidate or the Head of the Institution concerned.**
5. INCOMPLETE OR WRONG ENTRY OR DEFECTIVE APPLICATIONS ARE LIABLE TO BE REJECTED.
- 6.

Education of Father/Mother (Refer to Item No. 14)	
Education	Code
Up to Primary	1
Upper Primary	2
Secondary	3
Senior Secondary	4
Graduate	5
Post Graduate	6
Doctorate	7
Professional Degree (Engineering, Medicine, MCA, MBA etc)	8
Any other	9

Father's/Mother's Occupation (Refer to Item No. 13)	
Occupation	Code
Professional, technical and Related Worker	1
Administrative, Executive and Management Worker	2
Clerical and Related Worker	3
Sales/Service Worker	4
Farmer, Fisherman and Related Worker	5
Production and Related Worker Transport	6
Operators and Labourer Worker not classified by the above occupation	7
Not employed	8

District/Zone Code No.

*TYPE OF SCHOOL / INSTITUTION (refer to item No. 10)

- Government : A Government school is that which is run by the State Government or Centre Government or Public Sector Undertaking or an Autonomous Organisation completely financed by the Government.
- Local Body : A Local Body School is that which is run by panchayati Raj and local body institutions such as Zila Parishad, Municipal Corporation, Municipal Committee, Notified Committee and Cantonment Board.
- Govt. Aided : A Government Aided School is that which is run by an individual or a private organisation and receives grant from Government or local body.

Check-lists : 1. Aadhaar Xerox Copy; 2. Category Certificate (whenever applicable); 3. Income Certificate (Compulsory); 4. Class VIII reading certificate; 5. Two passport photo

NATIONAL MEANS-CUM-MERIT SCHOLARSHIP EXAMINATION, 2025
(For Class VIII studying students)

Name of the State : MANIPUR
(which will conduct the Examination)

ADMISSION CARD

Affix passport size
Photograph duly attested
by the Head of the
Institution

To be filled in by the applicant

Master/Miss

Date of birth

S/o, D/o, Shri

of (School)

of (District/Centre)

is permitted to appear in the NMMS Examination, 2025

Full Postal Address

PIN Code..... Mobile No.

She/He is allotted 12 digits Roll Number :

Scheme Code	State Code	Year	Centre Code	Serial No. (to be filled in the Office)	Class
03	13	25			08

[First Session : 10.30 am to 12 noon (MAT)
Second Session : 12.30 am to 2.00 pm (SAT)]

Date of Examination : Sunday, the 26th October, 2025

Venue of Examination Centre :

.....
.....

Signature of the District Liaison Officer,
NMMS Exam with seal

Signature of the Head of the Institution
with seal

Signature of the Invigilator
of the Examination Centre

Signature of the Candidate MAT
in the presence of Invigilator

SAT