

HEALTH AND ACTIVITY CARD



GENERAL INFORMATION



Aadhar Card no. of Student (optional) _____

NAME: _____.

ADMISSION NO.: _____ DATE OF BIRTH: _____.

M F T _____ BLOOD GROUP: _____.

MOTHER'S NAME: _____.

YOB * _____ WEIGHT * _____ HEIGHT * _____ BLOOD GROUP _____

AADHAR CARD NO. * _____

FATHER'S NAME: _____.

YOB * _____ WEIGHT * _____ HEIGHT * _____ BLOOD GROUP _____

AADHAR CARD NO. * _____

FAMILY MONTHLY INCOME * _____.

ADDRESS _____

_____.

PHONE NO. _____ (M): _____.

CWSN, SPECIFY _____.

SIGNATURE OF PARENTS/ GUARDIAN

DATE:

* Optional information; that need not be shared with CBSE. Data privacy and protection shall be the responsibility of the concerned school.

HEALTH AND ACTIVITY RECORD

Components	Parameters	Class 9 th	Class 10 th	Class 11 th	Class 12 th
Vision	RE/ LE				
Ears	Left/ Right				
Teeth Occlusion	Caries/ Tonsils/ Gums				
General Body Measurements	Height				
	Weight				
Circumferences	Hip				
	Waist				
Health Status	Pulse				
	Blood Pressure				
Posture Evaluation	If any: Head Forward/ Sunken Chest/ Round Shoulders/ Kyphosis/ Lordosis/ Adominal Ptosis/ Body Lean/ Tilted Head/ Shoulders Uneven/ Scholiosis/ Flat Feet/ Knock Knees/ Bow Legs				
Sporting Activities (HPE) (For details, see HPE manual available on CBSE website www.cbseacademic.in)	Strand 1: <u>Any one of following:</u> 1. Athletics/ Swimming 2. Team Game 3. Individual Game 4. Adventure Sports				
	Strand 2: Health and Fitness <i>(Mass PT, Yoga, Dance, Calisthenics, Jogging, Cross Country Run, Working outs using weights/gym equipment, Tai- Chi etc)</i>				
	Strand 3: SEWA				