





## **APPLICATION FORM FOR ADMISSION 2021-22**

			ВҮ	ΈΑ	SS	UN	IIT:	13,	/2/6	5,	Ma	he	ndı	ra I	Roy	Laı	ne,	Kol	kat	:a-7	00	04	6				
			M	ETI	AB	RU	Zι	JNI.	T: 1,	/58	8, G	ar	der	า R	eac	h R	oad	d, K	olk	ata	-70	0 0	)24			_	
	Affix a passport size photograph of the student									Affix a passport size photograph of father										Affix a passport size photograph of mother							
REGISTRATION NO.				о.							CLASS APPLIED FOR:																
	STUDENT'S DETAILS																										
STU	DENT'S N	IAME:																									
DATE OF BIRTH: GENDER: MALE FEMALE																											
SOC	SOCIAL CATEGORY:										MOTHER TO					ON	GUE	<b>:</b>									
NATIONALITY:							Π	Γ	T	BLOOD GROUP:										Γ	Τ		Γ	Τ			
MOBILE NO.:									T	_ 				SEC	ONI	) LA	NG	UAC	GE:			$\overline{T}$				_	
AADHAAR NO.:										T								F	RELI	GIO	N:		T		 	<u> </u>	<u> </u>
PLACE OF BIRTH:			 						T	$\top$		 										$\dot{\top}$		_	$\overline{}$	 	
LAST SCHOOL:			l	!		 	 	1 T	т Т	 	 	 				l	I		 	 	 T	$\frac{\perp}{\perp}$	l	 T	$\Gamma$	 _	
LAJ	DOES THE STUDENT HAVE ANY SIBLING IN THIS SCHOOL?																										
_					DO	ES	THE	ST	UDE	:N	Т Н/					ING									<u> </u>		_
-	S. No.	Name										Adm No.				Class & Sec. Presently studying in							_				
	2																										+
RESIDENTIAL ADDRESS:																											
Г									PE	RI	IAN	NEN	IT A	DE	ORES	SS:											$\neg$

## PARENT INFORMATION

FATHER	MOTHER

		IIL	<u> </u>	IVIOTILIA							
а	Name										
b	Qualification										
С	Occupation / Profession										
d	Organozation										
е	Official Address										
f	Mobile No.										
g	Email Id										
h	Annual Income										
i	Alumni										
j	Alumni Year										
k	Passing Class										
I	College/University										
GUARDIAN INFORMATION											
Guardian Name:											
R	elation:		Qualification:								
0	ccupation:	]	Telephone No.:								
Α	ddress:										
N	lobile:	]	Email Id:								
Do	Does your child have any medical of Psychological disorder? :										
	edical Details:										
	<b>DECLARATION BY TH</b>	1E	PARENT/GUA	<u>ARDIAN</u>							
	ereby certify that the above information provided by me										
	shall be automatically disqualified from Selection/Adn ation/Registration does not guarantee admission to my w		•	•							
аррііс	ation/Negistration does not guarantee admission to my w	vait	a. ragree to ablue b	y the rules and regulations of the institution.							
Date	Sign. of the Father		Sign. of the Mot	her Sign. of the Guardian							
	DOCUMENTS TO BE SUBMIT		_	_							
Two passport size student's and parent's photograph.											
•	Photocopy of Birth Certificate.										
	<ul> <li>Photocopy of Aadhaar Card.</li> <li>Photocopy of the Report Card of the previous school.</li> <li>Original Transfer Certificate.</li> </ul>										
•											
•	<ul> <li>Photo Identity and address proof of parents.</li> </ul>										
•	Photocopies of qualification certificates of parents.										
N	Note: Please carry original documents for physical verification.  For any assistance contact school office @ Bypass Unit - 8981311766, Metiabruz Unit - 9831072483										
	FOR OFFIC	CE	USE ONLY								

Date: \_\_\_\_\_

Receipt No.: \_\_\_\_\_

Rejected / Admitted to Standard:\_\_\_