

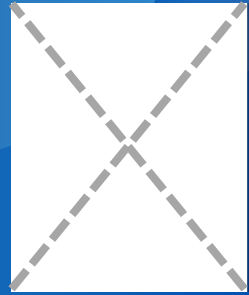


# MACAW PUBLIC SCHOOL

(Run By - MPS EDUCATIONAL TRUST)

Sargachi ( Near Bus Stand),Murshidabad,West Bengal

Contact Us : 7029048842 / 7602829584



## ADMISSION FORM

ADMISSION NO \_\_\_\_\_

ADMISSION FOR \_\_\_\_\_

### STUDENT INFORMATION

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Blood Group: \_\_\_\_\_

Nationality: \_\_\_\_\_

Religion: \_\_\_\_\_

Caste: \_\_\_\_\_

Gender: ☐ Male ☐ Female ☐ Other

Aadhar Number: \_\_\_\_\_

### GUARDIAN INFORMATION

Father's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

### COMMUNICATION ADDRESS

Permanent Address: \_\_\_\_\_

Present Address: \_\_\_\_\_

District: \_\_\_\_\_

State: \_\_\_\_\_

Pin Code: \_\_\_\_\_

Emergency Contact No: \_\_\_\_\_

### ADMISSION DETAILS

Class For Admission: \_\_\_\_\_

Previous School Attended: \_\_\_\_\_

Do you want hostel accommodation? \_\_\_\_\_

### MEDICAL INFORMATION

Does the student have any medical conditions? \_\_\_\_\_

Allergies (if any): \_\_\_\_\_

### CONSENT & AGREEMENT

☐ I certify that the above information is correct to the best of my knowledge.

Documents Submitted:

☐ Birth Certificate

☐ Transfer Certificate (TC)

☐ Parent/Guardian ID  
Proof

☐ Report Card Of Last Class

☐ Student Aadhar Card

☐ Other: \_\_\_\_\_

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

Signature: \_\_\_\_\_