



# SARADA ACADEMY (HIGH SCHOOL)

An English Medium School

4, Tiljala Road Kolkata -700039

9831476572/9681130197

## APPLICATION FORM FOR ADMISSION

1 (a) Name of the Student \_\_\_\_\_

(b) Nationality \_\_\_\_\_ (c) Religion \_\_\_\_\_

(d) Cast whether OBC/SC/ST/Gen \_\_\_\_\_ (e) Date of birth \_\_\_\_\_

2 (a) Father's Name \_\_\_\_\_ Occupation \_\_\_\_\_

(b) Mother's Name \_\_\_\_\_ Phone No. \_\_\_\_\_

(c) Address \_\_\_\_\_ P.O. \_\_\_\_\_

(d) P.S. \_\_\_\_\_ Dist \_\_\_\_\_

3 (a) Guardians Name \_\_\_\_\_ Occupation \_\_\_\_\_

(b) Address \_\_\_\_\_ P.O. \_\_\_\_\_

(c) P.S. \_\_\_\_\_ Dist \_\_\_\_\_ Phone No \_\_\_\_\_

4 Evidence of age (Birth Certificate/T.C./ Horoscope) \_\_\_\_\_

5 Admission sought in class \_\_\_\_\_

### Guardian's Declaration

I solemnly declare that the particulars about Master/ Miss \_\_\_\_\_

\_\_\_\_\_ are true and correct and agree to abide by all the rules and regulations of the School.

\_\_\_\_\_  
Signature of parents/Guardian

Date \_\_\_\_\_

#### *Student Details*

Last Attended School \_\_\_\_\_

Student Aadhar No \_\_\_\_\_

Birth Certificate Regd No \_\_\_\_\_

Transfer Certificate No \_\_\_\_\_

Student Suffer From Any Allergy :- Yes / No

Gender :- Male / Female

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School Guardians

Siblings or Cousin are Studying at School

Others \_\_\_\_\_

\_\_\_\_\_  
Signature of Headmaster/Headmistress

Date \_\_\_\_\_