Kidderpore Childs World English Medium School

4/3/H/3 Bhukailash Road, Kolkata 700023 (West Bengal)
Website: www.kcwskolkata.org Email: kcwskolkata@gmail.com
Ph. 033 2449 5913

Admission No. KCWS/1108		Year	2023-2024	Date of Admission	2020-12-31
Affix photo	of Father	Affix photo	of Mother	Affix photo	of Student

INFORMATION OF THE CHILD							
Full Name			SK. ATIF				
Date Of Birth.	2014-10-13	Gender	Male	Ad	lmitted in Class	4	
Aadhar No	Community		Male	Languages Know			
Mother Tangue		Blood Group			Height		
Religion	Islan	n	Nationality		Indian		
PER	MANENT ADDRESS		CORRESPONDENCE ADDRESS				
18/2H/11, Mor							
Father Mobile No: 8013412370			Mother Mobile No : 8274984881				
Email Id			Email Id				
Prefrred phone Nu	mber for school SMS	82749	Distance from school (in Kms):				

EMERGENCY CONTACT (Should Provide Local Contacts)									
Name	Sk. Subhani	Relationship	Father	Emergency ContactNo.	8013412370				

						FAMILY	' INF	ORM	ATION	١				
FATHER						MOTHER/GUARDIAN								
Full N	lame			Sł	k. Subhani			Full N	lame	Akhta		tari Khatoon		
Age	0)	Nation	nality				Age	()	Nationality			
Educa	ation	•			Mobile No	80134123	370	Educ	ation			N	Nobile No	9748127665
Institu	ution							Institution						
Occupation							Occup	Occupation Housewife			wife			
Annual Income							Annual Income							
Office Address							Offic	e Add	ress					
I	Design	ation							Desig	nation				
Aadhar No						Aadhar No								
		-			S	ingle Parer	nt(Oı	nly if	applic	able)				
Single	e Pare	nt	no		Father					ı	Mother			
	Add	dress												
	If c	hild is	sponso	ored(Agency na	ıme)								
					Detail	s of Brothe	ers/S	isters	of th	e Stu	dent			
Naı	Name					Ą	ge		Class					
	Institu	ution												
						Incase	o of	etaff v	ward					
Nan	ne of t	he nar	ent			IIICast	-	Stair	waru					
Itali		ne pai												
						ETAILS OF	F PR	EVIO	US S1	ΓUDY				
Year 0 Class Grade/Ma				e/Ma	arks obtained in final exams:									
The	previo	us sch	nool affi	liated	d to:				Schoo	ı				
Aw	ards v	von s	o far in s	sport	s,arts or a	cademics								
l parent	aratic / legal g sary for ss or inj ise, i sh	juardia anv rea	n. I under ason. I de m whatev de by the	take t eclare ver sou decisi	he responsi	uthority to adn bility of providi ements provid ntanglements, anagement. I a	ing an ded in	y evide this ap	ence ne	eded to n are co of life o ne rules	suppo orrect to or mone s. regula	rt the info o my knov y, which tions and	rmation provided and i	school as the vided here, if if found while my child is ucture of the school
Signature of Parent or Guardian with date							Sian	ature	of th	 е Неа	of the I	 nstitution		

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Name	SK. ATIF						
Class							
Address							