



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/2832	Year	2023-2024	Date of Admission	2025-02-24
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Affix photo of Father	Affix photo of Mother	Affix photo of Student
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INFORMATION OF THE CHILD					
Full Name	SHREYA NAG				
Date Of Birth.	2014-02-08	Gender	Female	Admitted in Class	8
Aadhar No	617402250280	Community	Female	Languages Know	
Mother Tanguage		Blood Group		Height	
Religion	Hindu		Nationality	Indian	
PERMANENT ADDRESS			CORRESPONDENCE ADDRESS		
11 OrphangungeRoadm, Kidderpore, Kolkata 700023.					
Father Mobile No:	8100220700		Mother Mobile No :	6204806796	
Email Id			Email Id		
Prefrred phone Number for school SMS	8100220700		Distance from school (in Kms):		

EMERGENCY CONTACT (Should Provide Local Contacts)					
Name		Relationship		Emergency ContactNo.	

FAMILY INFORMATION									
FATHER					MOTHER/GUARDIAN				
Full Name		Dhiraj Prasad Nag			Full Name		Sandhya Devi		
Age	0	Nationality			Age	0	Nationality		
Education		Mobile No			Education		Mobile No		
Institution					Institution				
Occupation		Service			Occupation		Housewife		
Annual Income					Annual Income				
Office Address					Office Address				
Designation					Designation				
Aadhar No		535924414792			Aadhar No		434547559843		

Single Parent(Only if applicable)				
Single Parent		Father		Mother
Address				
If child is sponsored(Agency name)				

Details of Brothers/Sisters of the Student					
Name		Age		Class	
Institution					

Incuse of staff ward	
Name of the parent	

DETAILS OF PREVIOUS STUDY						
Year	224	Class	IV	Grade/Marks obtained in final exams:		
The previous school affiliated to:			School Dumty Kindergarten School, Ram Kamal Street,			
Awards won so far in sports,arts or academics						

Declaration

I _____ have the authority to admit my child/ Ward _____ into the school as the parent/ legal guardian. I undertake the responsibility of providing any evidence needed to support the information provided here, if necessary for any reason. I declare that the statements provided in this application are correct to my knowledge and if found sickness or injury from whatever source, legal entanglements, imprisonment, loss of life or money, which might occur while my child is otherwise, i shall abide by the decision of the management. I agree to abide by the rules, regulations and the fee structure of the school

Signature of Parent or Guardian with date

Signature of the Head of the Institution



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Name SHREYA NAG

Class

Address