



MYMENSINGH INTERNATIONAL SCHOOL (MIS), MYMENSINGH CANTONMENT

ADMISSION FORM

FORM NO:

Photographs
01 copy
(Passport Size)

Fill in the form in English (Block letters)

ADMISSION TEST ROLL NO: CLASS: SECTION / SHIFT:

- Name of the Student (English):
শিক্ষার্থীর নাম (বাংলা) :
- Date of Birth:..... on 01 Jan 2024 year monthdays.
Blood Group:Gander: Male / Female Religion: Islam / Hindu / Christian / Buddha (Please Tick)
- Sibling (If any): Name ----- Roll ----- Class ----- Section -----
- Type of Students: Civil / Defence (Army / Navy / Air Force) On Service / Retd – (Please tick)
- Father's Name, Rank/ Occupation and official address:
.....
পিতার নাম (বাংলা) :
- Father's Monthly Income: E-mail Cell no:
- Mother's Name, Rank / Occupation and official address:
মাতার নাম (বাংলা) :
- E-mail Cell no
- Present Address:
.....
- Permanent Address.....
.....
- Name of the local Guardian (If applicable):Relation
Address (with cell no)

I hereby affirm that the particulars stated above are true and my son/daughter/ward is not having any contagious disease. I pledge to abide by the rules and regulations of the school. I am also aware of the fact that the decision of the School authority on any matter relating to my son/daughter/ward will be final.

Parents/Guardian's Sign
Dated:

Office Super_____Class Teacher_____Principal_____

- Note: *If any change Address/Cell number must inform this office and respective class teacher please.
- * Birth Certificate to be attached (photo copy)
 - * 1 copy passport size & 1 copy stamp size photographs
 - * TC of previous school (photo copy)
 - * Parents' NID photocopy (Father & Mother)



MYMENSINGH INTERNATIONAL SCHOOL (MIS), MYMENSINGH CANTONMENT

INTERVIEW CARD

Photographs
01 copy
(Stamp Size)

ADMISSION TEST ROLL NO: FORM NO:

CLASS WHERE ADMISSION INTENDED:..... Section / Shift

- FULL NAME OF THE STUDENT (IN CAPITAL) :
- ADMISSION TEST WILL BE HELD ON

.....
Signature of Office Super
Date: