Admission Form No.: C.A.G.S/ / 2027 Dated: 01.04.2009

# THE C A G SCHOOL

(ISO 9001-2015 Certified)
Email: info.cagschool@gmail.com
6 & 29, Pollock Street, Kolkata – 700 001
Phone No.: 9230987139/9230987140

**APPLICATION FORM (Session 2027)**
**Secondary Section (V to IX)**

| Candidate | Father | Mother |
|---|---|---|

Student's Name: Miss/Master: ……Blood Group……..

Date of Birth ……..…..Place of Birth……

Native Place……Nationality……..…

Religion……..Caste……..

Last School attended ……..Class……Year……..

Class in which admission is sought ……

Father's Name: ……

Educational Qualification: ……

Occupation: …… Monthly Income……

Contact No. …… E-mail ID ……..

Mother's Name……..

Educational Qualification ……

Occupation …… Monthly Income ……

Contact No. ……..E-mail ID ……

P.T.O

Guardian's Name ……..

Address ……

……

Contact No. …… ……..E-mail ID ……..

Who will collect the student at the time of dispersal? ……..

*I certify that the above information is correct. I undertake that my son/daughter and I will abide by the rules and regulations that are or may be enforced from time to time. In case of breach of the rules and regulations of the school by my ward or by me, you can remove my ward from the school.*

***Signature***:

Father…… Mother…….. Guardian……..

Date of Issue ……..

***Reference:***

**Documents to be attached -**

- Photocopy of Birth certificate and Aadhar Card
- Photocopy of address proof (Aadhar card/ voter ID Card etc.)

***NOTE: Submit the application form within 10 days from the date of issue.***