



Cantonment Public School & College Momenshahi

Know Your Student (KYS) Form

(সকল তথ্য ইংরেজিতে বড় হাতের অক্ষরে লিখতে হবে এবং * চিহ্নিতগুলো অবশ্যই পূরণ করতে হবে)

পাসপোর্ট সাইজের
ছবি ০১ কপি
(গাম দ্বারা সংযুক্ত)

* STUDENT INFORMATION

* Version	<input type="checkbox"/> Bangla <input type="checkbox"/> English	* Session		Admission Date	
* Program/Class		* Section		* Admission Type	<input type="checkbox"/> New <input type="checkbox"/> Re.
* Group	<input type="checkbox"/> Sci <input type="checkbox"/> Hum <input type="checkbox"/> B.S	* House	<input type="checkbox"/> I <input type="checkbox"/> N <input type="checkbox"/> Z	Board	
* Shift	<input type="checkbox"/> Morning <input type="checkbox"/> Day	* Category		* নিচের তালিকা হতে সিরিয়াল সহকারে ক্যাটাগরি লিখতে হবে।	

Student ID		Class Roll	
* Student Name		Birth ID	
* Emergency Mobile		* Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female
* Date of birth		* Nationality	Bangladeshi
* Religion	<input type="checkbox"/> Islam <input type="checkbox"/> Hinduism <input type="checkbox"/> Christian <input type="checkbox"/> Buddhist	* Blood Group	
Student Mobile		Student's email	

* FATHER'S INFORMATION

Name		Mobile No.	
Office Name		Office Address	
Office Phone No.		Designation	
Occupation		NID	
TIN		Email	
Annual Income			

* MOTHER'S INFORMATION

Name		Mobile No.	
Office Name		Office Address	
Office Phone No.		Designation	
Occupation		NID	
TIN		Email	
Annual Income			

* PERMANENT ADDRESS

House		District		P.O.	
Road		Upazilla/P.S.		P.O. Code	
Ward No		Union/Pourosova		Village	
Area/Section					

* DEFENSE

Father Mother

Rank		Service		Station/Cantt.	
Regiment No		Dept/Unit		Job Location	
Service Status	<input type="checkbox"/> Serving <input type="checkbox"/> Rtd.	Retirement		No of Child	
Mission Starts		Mission Ends		Mission Place	

BROTHER'S/SISTER'S INFORMATION (IF APPLICABLE)

Name		Name	
Description		Description	
Relationship		Relationship	
Institution		Institution	

CATEGORY: (1) Army, (2) Civil, (3) Teacher/Staff, (4) Scholarship, (5) Shaheed Paribar, (6) Army Retired, (7) Navy, (8) Navy Retired, (9) Air Force, (10) Air Force Retired, (11) Defense Budget

*** COURSE/SUBJECT (S) INFORMATION (ONLY APPLICABLE FOR CLASS- NINE, TEN, ELEVEN & TWELVE)**

			(4 th Subject)-

PREVIOUS ACADEMIC RECORD

Exam	Group	Roll	Registration	Session	Board/School	GPA
PECE						
JSC						
SSC						

LOCAL GUARDIAN'S INFORMATION

1st Guardian	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other		
Guardian name		Relation	
Guardian Office		Mobile No.	
Office Phone		Office Address	
Occupation		Designation	
TIN		NID	

GARDIAN'S PRESENT ADDRESS

House		District		P.O.	
Road		Upazilla/P.S.		P.O. Code	
Ward No		Union/Pourosova		Village	
Area/Section					

GUARDIAN'S PERMANENT ADDRESS

House		District		P.O.	
Road		Upazilla/P.S.		P.O. Code	
Ward No		Union/Pourosova		Village	
Area/Section					

FIRST ADMISSION RECORD (OPTIONAL)

Program/Class		Group		Admission Date	
Class Roll		* Session		Admission Type	

DECLARATION & SIGNATURE

We declare that the particulars given by us are true to the best of our knowledge as on the date of providing such information.

Date:

 Student's Signature

 Guardian's Signature