



NEW VISTA ACADEMY

Bagpota Road, Sarsuna, Kolkata 700061

Ph. +91 62912 37738

APPLICATION FOR ADMISSION FOR THE SESSION
(PLEASE COMPLETE THE FORM USING CAPITAL LETTERS)

Please attach a
passport size photo
of the candidate

Please attach a
passport size photo
of the
candidate's father

Please attach a
passport size photo
of the
candidate's mother

NAME OF THE CANDIDATE

(as given in the Municipal Corporation Birth Certificate)

CLASS (applied for admission)

DATE OF BIRTH

(as given in the Municipal Corporation Birth Certificate)

SEX

AGE AS ON 01.01.2022

YEAR

MONTHS

NATIONALITY

RELIGION

MOTHER TONGUE

NAME OF THE PREVIOUS SCHOOL

CLASS

NAME OF SIBLING IF STUDYING IN THIS SCHOOL

CLASS

FATHER'S NAME

EDUCATIONAL QUALIFICATION

OCCUPATION

MONTHLY INCOME

OFFICE ADDRESS

PHONE NO.

MOBILE NO.

E-MAIL

HOME ADDRESS

PHONE NO.

MOTHER'S NAME

EDUCATIONAL QUALIFICATION

OCCUPATION

MONTHLY INCOME

OFFICE ADDRESS

PHONE NO.

MOBILE NO.

E-MAIL

HOME ADDRESS

PHONE NO.

I hereby declare that the information supplied in this form is complete, true and up to date in every detail.

SIGNATURE OF LEGAL GUARDIAN

DATE