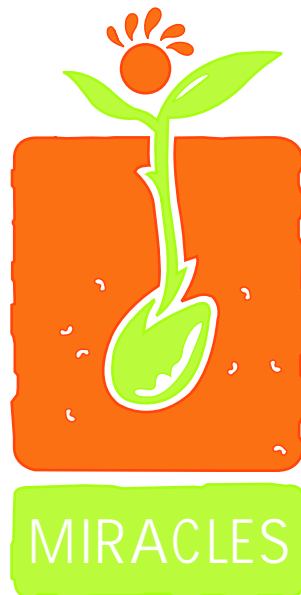


ADMISSION FORM



School & Boarding : "Miracles Home"
564, J.R. Ghosh Garden, P.O. Laskarpur,
Mahamayatala, Garia, 24 Pgs (S), Kolkata - 153
24hr Helpline : 9830888888, 9831028888, 9830028888
Email : vp@miraclespecialschool.com, sec@motherandchildngo.org
Website : www.miraclespecialschool.com, www.motherandchildngo.org





MIRACLES HOME AND RESEARCH TRUST

Company: _____ Designation: _____

Address: _____ (Father's)

Company: _____ Designation: _____

Address: _____ (Mother's)

Permanent Address: _____

Town/City: _____ State: _____

Country: _____ PIN

--	--	--	--	--	--

Address for Communication: _____

Town/City: _____ State: _____

Country: _____ PIN

--	--	--	--	--	--

Email ID: _____ Phone/Mobile: _____

LOCAL GUARDIAN'S PROFILE

Father's Name

First	Middle	Last

(Leave a space between first name, middle name and last name)

Address: _____

Email ID: _____ Phone/Mobile: _____

Town/City: _____ PIN

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Cont.



MIRACLES HOME AND RESEARCH TRUST



Are there any special needs of your ward (please specify):

Local Contact Numbers

I hereby declare that the information given above is true to the best of my knowledge and belief. I further declare that I have read the rules of the school and agree to abide by them.

Signature of Father

Signature of Mother

Date:

FOR OFFICE USE ONLY

Date of Admission : _____ Bed No. : _____

Admission Coordinator's Remarks:

Date :

Signature

Headmaster's Remarks :

Signature of the Headmaster:

