



Form No.

ADMISSION FORM

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Mirpur English Version School & College

COMPLETE CONTACT NUMBER AND EMAIL ADDRESS ARE MANDATORY

To which class are you applying for admission?

EARLY-I EARLY-II EARLY-III I II III IV V VI VII VIII IX X XI XII

Preferred Shift (For Early-I, Early-II, Early-III only)

First Shift

Second Shift

Student's Details

Given Name(s) (as in birth registration) First Name Middle Name Last Name

Nationality Date of Birth DD MM YYYY Sex M F

Current School/College (Applicable from Early-II-IX)

Student lives with Both Parents Father Mother Guardian

Student's Mobile (If applicable) Email (If applicable)

Does the student have any mental or physical disability/challenge? (If so, please specify) No Yes

Does the student have a special medical condition? (If so, please specify) No Yes

Father's Details

Full Name Mr. Check here if deceased/dead

Nationality (If non-Bangladeshi, please submit photocopy of work permit) Marital Status Married Divorced Widowed Separated

Educational Institution (Last attended) Qualification

Occupation Office Address
Organization
Designation

Telephone (Office) Mobile (Office)
Telephone (Home) Mobile (Home)

Email (Office) Email (Personal)

Mailing Address (Where all official communication will be done)

Are you working in MEVSC or EKR English & Academic Institute No Yes (If yes, please state your Position) Position



Mother's Details

Full Name	Mrs/Ms.	<input type="text"/>	<input type="checkbox"/>	Check here if deceased/dead
Nationality <small>(If non-Bangladeshi, Please submit photocopy of work permit)</small>	<input type="text"/>	Marital Status	<input type="checkbox"/> Married	<input type="checkbox"/> Divorced
			<input type="checkbox"/> Widowed	<input type="checkbox"/> Separated
Educational Institution <small>(Last attended)</small>	<input type="text"/>	Qualification	<input type="text"/>	
Occupation	<input type="text"/>	Office Address	<input type="text"/>	
Organization	<input type="text"/>			
Designation	<input type="text"/>			
Telephone (Office)	<input type="text"/>	Mobile (Office)	<input type="text"/>	
Telephone (Home)	<input type="text"/>	Mobile (Home)	<input type="text"/>	
Email (Office)	<input type="text"/>	Email (Personal)	<input type="text"/>	
Mailing Address <small>(Where all official communication will be done)</small>	<input type="text"/>			
Are you working in MEVSC or EKR English & Academic Institute	<input type="checkbox"/> No	<input type="checkbox"/> Yes (If yes, please state your Position)	Position	<input type="text"/>

Guardian's Details

(This section is only applicable if the student does not live with parents)

Full Name	<input type="checkbox"/> Mr.	<input type="checkbox"/> Mrs./ Ms.	<input type="text"/>	
Nationality	<input type="text"/>			
Relationship to Student	<input type="checkbox"/> Uncle (paternal)	<input type="checkbox"/> Aunt (paternal)	<input type="checkbox"/> Grandparent (paternal)	Brother
	<input type="checkbox"/> Uncle (maternal)	<input type="checkbox"/> Aunt (maternal)	<input type="checkbox"/> Grandparent (maternal)	Sister
	<input type="checkbox"/> Cousin	<input type="checkbox"/> Other (please state)	<input type="text"/>	
Telephone	<input type="text"/>	Mobile	<input type="text"/>	
Email (Office)	<input type="text"/>	Email (Personal)	<input type="text"/>	
Mailing Address	<input type="text"/>			

Sibling Information

No. of siblings	<input type="text"/>	Student of MEVSC	<input type="checkbox"/> Yes	<input type="checkbox"/> No (Mention other School)	<input type="text"/>
Sibling's ID (If studying in MEVSC)	<input type="text"/>	<input type="checkbox"/> Existing student	<input type="checkbox"/> Graduated		
Sibling's ID (If studying in MEVSC)	<input type="text"/>	<input type="checkbox"/> Existing student	<input type="checkbox"/> Graduated		

List all political, social, charitable or professional organizations to which you (father or mother) belong

<input type="text"/>
<input type="text"/>
<input type="text"/>

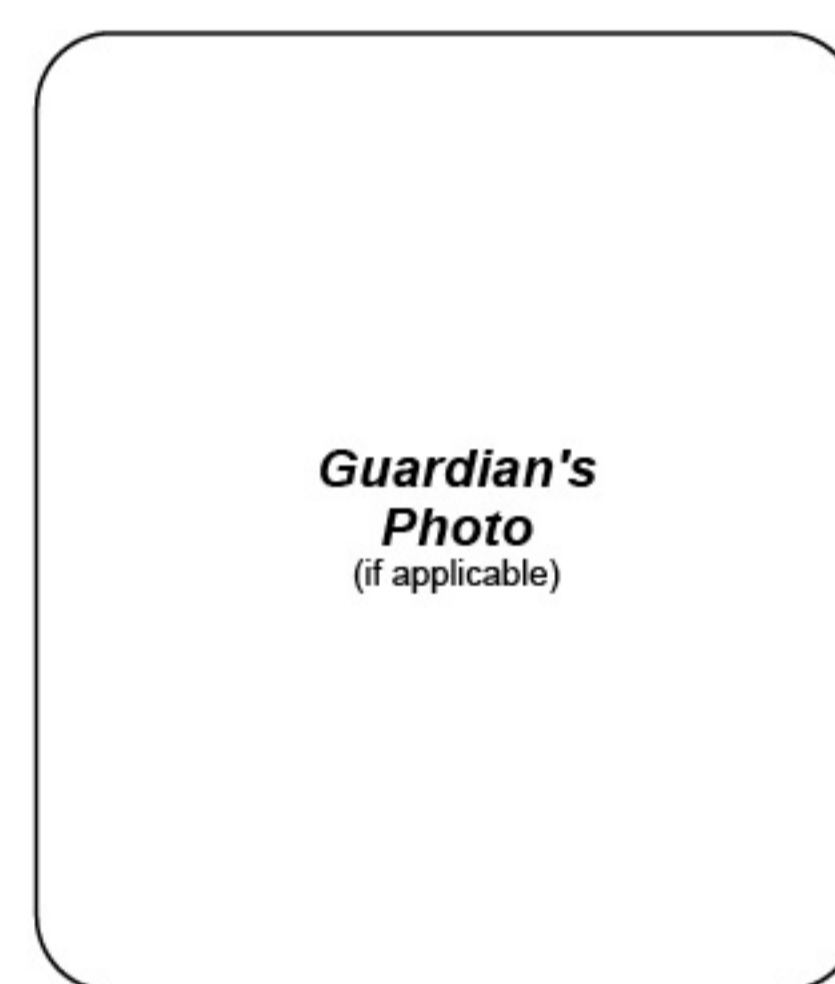
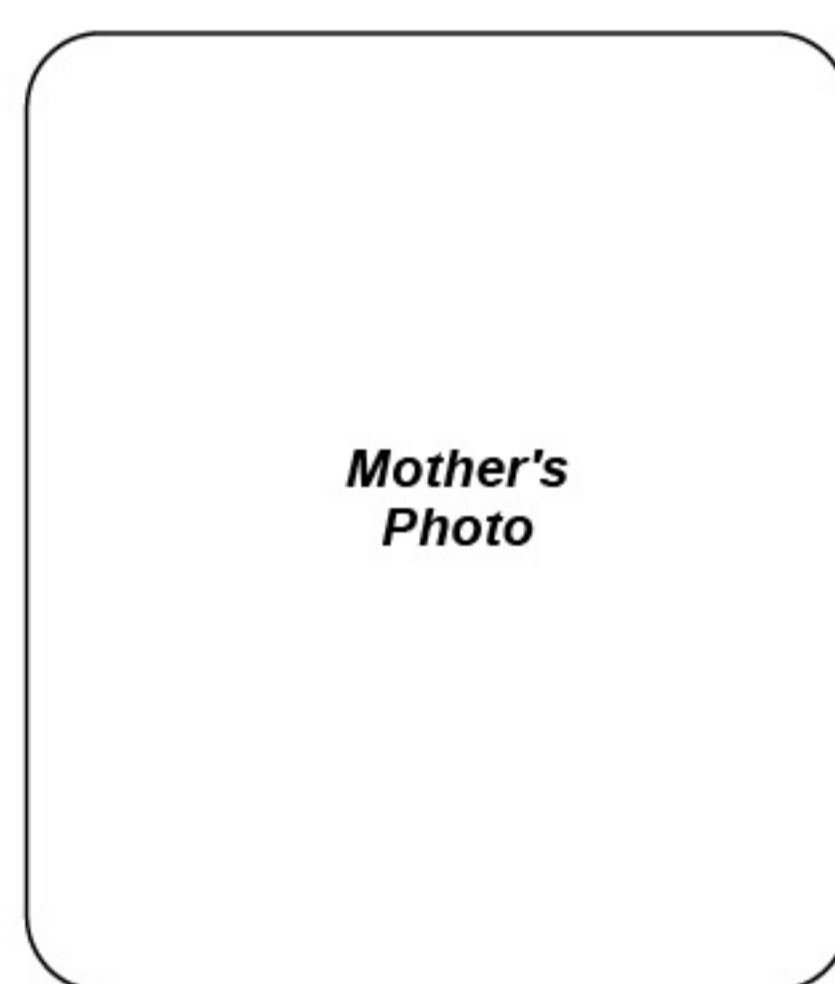
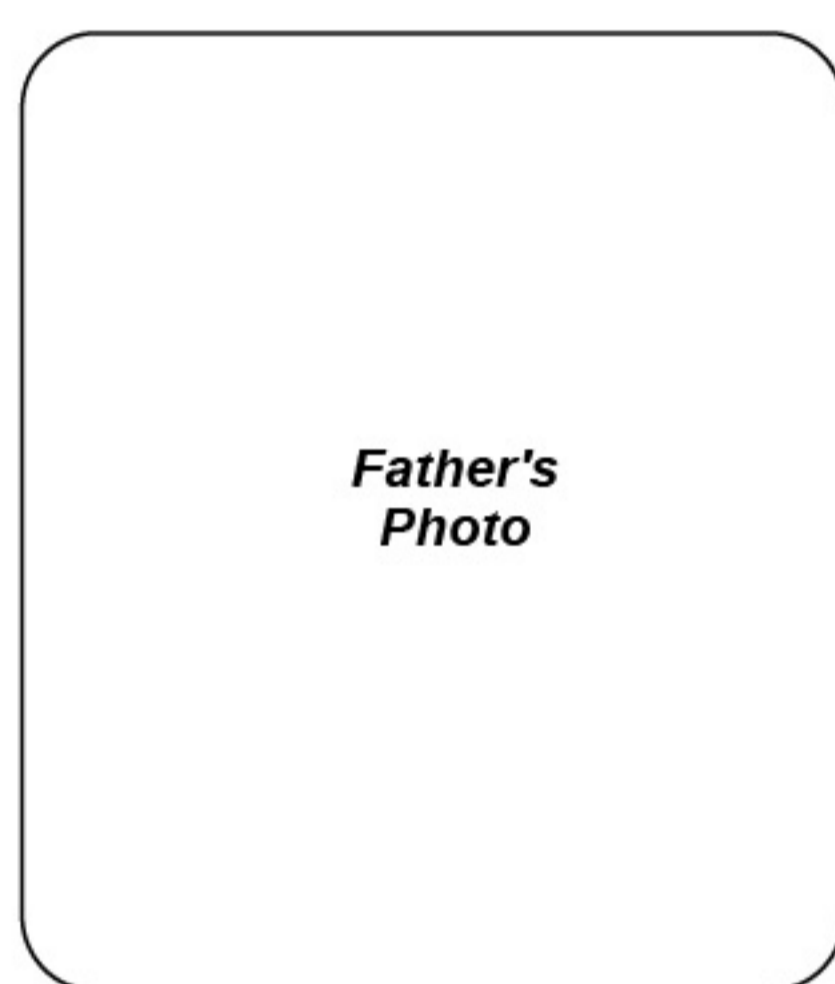
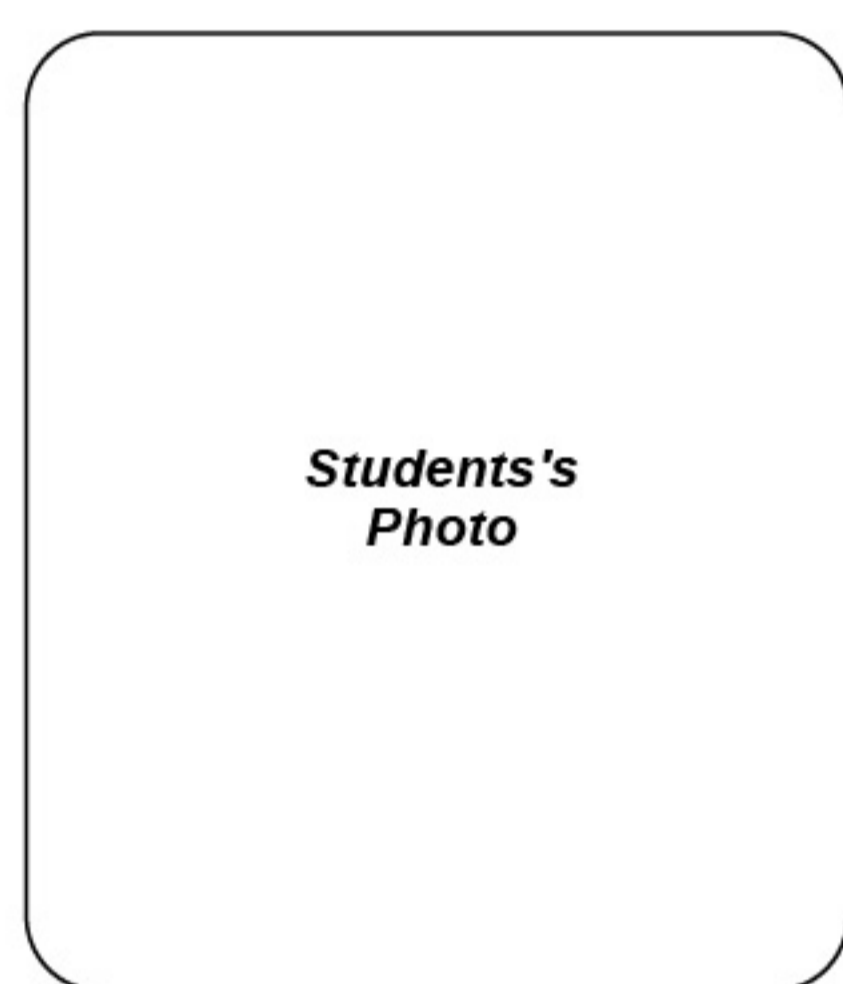


ADMISSION FORM

List 2 (two) referees who can verify information about you

1. Name	<input type="text"/>	2. Name	<input type="text"/>
Telephone	<input type="text"/>	Telephone	<input type="text"/>
Mobile	<input type="text"/>	Mobile	<input type="text"/>
Email	<input type="text"/>	Email	<input type="text"/>
Relationship to student	<input type="text"/>	Relationship to student	<input type="text"/>

Attach passport size photograph (please DO NOT staple photographs).



CHECKLIST

- A photocopy of the Birth Certificate
- Previous Class Report Card photocopied (if available)
- Authorization letter for the Guardian: Please, give us the name of a nominated guardian if the parent are going to be absent from the country or if the student reside with anyone other than parents. You are requested to give us the name, address and a letter stating all the responsibilities of the guardian towards the student and that, on your behalf, the authorized person is allowed to receive any information given by the school. (This is only applicable if the student has a nominated guardian).
- Business Card(s) of both father and mother (if available).
- Photocopy of the student's legal custody paper (applicable for divorced/separated parents).
- In the event of demise of natural guardian, please submit the valid guardian certificate issued by competent court of law as per applicable laws.

A completed application form together with all the above documents should be submitted to MEVSC Admissions Office, Saturday to Thursday between 8:30 am to 5 pm only

I hereby certify that the information given above are all correct.

Father's Name & Signature

Mother's Name & Signature

Guardian's Name & Signature
(if applicable)

Principal's Signature