

Student Details

PURBABANJHAPARA ADARSHA SHISHU SHIKSHA NIKETAN (H.S)

Govt.Regd.No.-S/2L/28162

ESTD-2000

Place:- Purbabanjhapara, Harkharkha, Malda, W.B(732128)

Contact: purbabanjhapara.assn@gmail.com/ 9647897295



session	Date	Type	Van	Reg. No	Class	<div>Photo Here</div> <div>Choose File No file chos</div>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Roll No	Sec	Student Name				
<input type="text"/>	<input type="text"/>	<input type="text"/>				
Address		Village:		P.O:		
P.S.:		Dist:		PinCode:		
<input type="text"/>		<input type="text"/>		<input type="text"/>		
Date of Brth		Gender		Category	Blood Group	
<input type="text"/>		<input checked="" type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Others		<input type="text"/>	<input type="text"/>	
Mobile No		WhatsApp No		Religion		
<input type="text"/>		<input type="text"/>		<input type="text"/>		
Father Name						
<input type="text"/>						
Qualification:		Occupation:		Monthly Income:		
<input type="text"/>		<input type="text"/>		<input type="text"/>		
Mother's Name						
<input type="text"/>						
Qualification:		Occupation:		Mnthly Income:		
<input type="text"/>		<input type="text"/>		<input type="text"/>		
Student Aadhar No				Co-Currricular activities, if any		
<input type="text"/>				<input type="text"/>		
Bank Details						
AC:				Bank Name:		
<input type="text"/>				<input type="text"/>		
Branch Name:				IFSC Code:		
<input type="text"/>				<input type="text"/>		
Previous School Name and Address(if outsider)					Transfer Certificate(TC), if any	
<input type="text"/>					<input type="text"/>	

Father's Signature

Mother's Signature

Signature & Seal of School