



# Sushila Birla Girls' School

7, Moira Street, Kolkata - 700017

School No. 15724

Affiliation No. 2430096

ACADEMIC SESSION: 2025 - 2026



## Application Form for Admission to Lower K.G., Upper K.G. & Classes II - X

For Office Use  
Admission No.

Application Form No.

### Applicant's Information

Name of the Applicant: \_\_\_\_\_

Date Of Birth (in figures): Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

Class applying for: \_\_\_\_\_ Blood Group: \_\_\_\_\_

Aadhar Number of the Applicant: \_\_\_\_\_ Social Category: \_\_\_\_\_

Religion: \_\_\_\_\_ Mother Tongue: \_\_\_\_\_

Nationality: \_\_\_\_\_ Residential Distance from School (in K.M.): \_\_\_\_\_

Living with: \_\_\_\_\_ Languages known: \_\_\_\_\_

Physical Impairment (If Any): \_\_\_\_\_

Major Illness (If Any): \_\_\_\_\_

Emergency Contact Number: \_\_\_\_\_ Student's Contact Number (if any): \_\_\_\_\_

Present School: \_\_\_\_\_ Present Class: \_\_\_\_\_

Second Language: \_\_\_\_\_ Affiliation of Present School: \_\_\_\_\_

Present School Address: \_\_\_\_\_

Co-curricular Activities participated in: \_\_\_\_\_

Stamp size  
photograph  
of the  
Applicant

### Parents

Parent: Single Mother / Single Father / Both

### Father's Details

Father's Name: \_\_\_\_\_

Qualification: \_\_\_\_\_

Occupation: \_\_\_\_\_

Designation: \_\_\_\_\_

Name of the Organization: \_\_\_\_\_

Address of the Organization: \_\_\_\_\_

Office Phone Number: \_\_\_\_\_

Mobile Number: \_\_\_\_\_

Email ID: \_\_\_\_\_

Aadhar Card Number: \_\_\_\_\_

Is father an alumni of Birla High School, if yes (year of passing out): \_\_\_\_\_

Special Interests: \_\_\_\_\_

Stamp size  
photograph  
of the  
Father

## Mother's Details

Mother's Name: \_\_\_\_\_

Qualification: \_\_\_\_\_

Stamp size  
photograph  
of the  
Mother

Occupation: \_\_\_\_\_

Designation: \_\_\_\_\_

Name of the Organization: \_\_\_\_\_

Address of the Organization: \_\_\_\_\_

Office Phone Number: \_\_\_\_\_

Mobile Number: \_\_\_\_\_

Email ID: \_\_\_\_\_

Aadhar Card Number: \_\_\_\_\_

Is Mother an alumni of Sushila Birla Girls' School, if yes (year of passing out): \_\_\_\_\_

Special Interests: \_\_\_\_\_

## Residential Address

Address: \_\_\_\_\_

State: \_\_\_\_\_

City: \_\_\_\_\_

District: \_\_\_\_\_

Pin code: \_\_\_\_\_

Police Station: \_\_\_\_\_

Area: \_\_\_\_\_

Phone Number: \_\_\_\_\_

## Permanent Address

Address: \_\_\_\_\_

State: \_\_\_\_\_

City: \_\_\_\_\_

District: \_\_\_\_\_

Pin code: \_\_\_\_\_

Police Station: \_\_\_\_\_

Area: \_\_\_\_\_

Phone Number: \_\_\_\_\_

## Guardian Details

Guardian's Name: \_\_\_\_\_

Relationship with Applicant: \_\_\_\_\_

Occupation: \_\_\_\_\_

Office address: \_\_\_\_\_

Residential address: \_\_\_\_\_

Office phone no.: \_\_\_\_\_

Residential phone no.: \_\_\_\_\_

Mobile number: \_\_\_\_\_

Aadhar Card Number: \_\_\_\_\_

Email ID: \_\_\_\_\_

## Sibling Details

Sibling Name	Class & Section	School	Sibling Admission No. (if any in BHS / SBGS)

## Declaration

I / We hereby certify that the above information provided by me / us is correct.

I / We understand that if the information is found to be incorrect or false, my ward will be automatically debarred from the selection / admission process without any correspondence in this regard.

I / We also understand that the application does not guarantee admission to my ward.

I / We accept the process of admission undertaken by the school and I / we will abide by the decision taken by the school authorities.

Date: \_\_\_\_\_

Signature of Mother: \_\_\_\_\_ Signature of Father: \_\_\_\_\_

## Mandatory Attachments

### 1. THE FOLLOWING DOCUMENTS SHOULD BE ATTACHED ALONG WITH THE FORM.

- a) Attested copy of Report Card of the last major examination conducted in current school.
- b) Attested copy of Birth Certificate issued by Municipal Corporation.