

17. Particulars of T.C.- T.C. No: Date of Issue:
Class:
Name of School :
Board :
Dues Cleared up to:

18. Particulars of SSC Examination:

- a. Name of the School from which passed:
- b. GPA. : Year of Passing: Roll No:
- c. Reg. No: Session: Name of Board:

19. Subjects to be taken a) Compulsory: 1. Bangla 2. English
b) Elective: 1. 2.
3.
c) 4th Elective Subject:

20. Documents Enclosed: a)Passport Copy b)Passport Size Photograph c) Mark sheet d) Testimonial

21. I solemnly declare that the particulars given are true and I shall abide by the rules and regulations of the Institution.

(Signature of Student)
Date:

(Signature of Guardian)
Date:

PART – 2
(For office use only)

1. Comments of the Head: Recommended/Not Recommended for admission in Grade

(Signature of Head of School)
Date:

2. Principal's Order: Admit in Grade:

(Signature of Principal)
Date:

(For Accounts Office only)

- a. Date of Admission: Admission Serial:
- b. Class & group in which Admitted House:
- c. Student No:

(Signature of Accountant)
Date:



PARTICULARS OF STUDENT FOR PERSONAL FILE

(To be filled in by the Parent/Guardian/Student)

First Name (As in Passport)		Surname (As in Passport)	
Known as	Student Number		Qatar Identity Number
Date of Birth	Nationality		Grade & Class

Contact Information:

Postal Address	
Residence Telephone Number	
Mother's Office Number	
Mother's Mobile Number	
Father's Office Number	
Father's Mobile Number	
Father's Name	
Mother's Name	



BANGLADESH MHM SCHOOL & COLLEGE, DOHA –QATAR

INDEMNITY FORM

I, of P.O. Box,
being the lawful parent/guardian of (student's name)

Student No. Grade: hereby agree that:

BANGLADESH MHM SCHOOL & COLLEGE or any teacher, official, voluntary helpers or administration staff of the school, shall have no responsibility of whatsoever nature in respect of bodily injure to the above child:

1. Prior to actual delivery of the said child into the custody of the said teachers or officials inside the school grounds, or after the child has been collected from the school ground by a person authorized by me to do so, on a normal school day.
2. Whilst on school grounds outside the official opening times
3. At any other time, unless the said child is in the direct custody or control of one of the said teachers whilst on a recognized outing or function arranged by the school.
4. Unless the injury is caused by, or resulting from:
 - a. The neglectful act or omission of any employee, teacher or other person or persons authorized to act for or on behalf of the said school.
 - b. Any defect on the premises of the said school.

In addition agree to:

5. Indemnify and keep indemnified the said school in respect of any amounts which the said school may pay, in respect of medical or other expenses arising from accidental bodily injury to t he said child other than as set out in 4.
6. Indemnify and keep indemnified the said school in respect of any loss or damage to property belonging to or in the custody or control of the said school caused by the said child.

Name & Address of Parent/Guardian:

Signed _____ Date: _____