

FORM FOR ADMISSION

TAKSHYASHILA

A Premier Educational Institution

HEADOFFICE : 50. SC

: 50, SOUTH END PARK • KOLKATA - 700 029

PHONE: 2466-1376, • MOB.: 9433421178

TOLLYGUNGEBR.: 140/43, N.S.C. BOSE ROAD ● (OPP. MALANCHA

CINEMA) • KOLKATA - 40 • PHONE : 2381-3932

Visit us : www.takshyashila.com . E-mail : info@takshyashila.com

| 1 | . NAME OF THE CANDIDATE | |
|----|--|------------------|
| 2 | . CONTACT PHONE NO | MOBILE NO. : |
| 3. | GUARDIAN'S NAME | RELATION |
| 4. | ADDRESS | |
| 5. | THE SCHOOL/COLLEGE WHERE THE CANDIDATE IS STUDYING | |
| | 300000 | CLASS / STANDARD |
| 6. | SUBJECT/S UNDERTAKEN FOR COACHING | |
| 7. | DATE OF ADMISSION | |
| я | SIGNATURE OF APPROVAL OF THE GUARDIAN | |