

International Hope School Bangladesh Admission Form

Student Information:

- Full Name: _____
- Date of Birth: ____ / ____ / ____ (DD/MM/YYYY)
- Gender: ☐ Male ☐ Female ☐ Other
- Nationality: _____
- Religion: _____
- Address: _____
- Contact Number: _____
- Email Address: _____

Parent/Guardian Information:

- Full Name: _____
- Relationship to Student: _____
- Contact Number: _____
- Email Address: _____
- Occupation: _____

Academic Information:

- Applying for Grade: _____
- Previous School Name: _____
- Last Completed Grade: _____
- Last Exam Results (if applicable): _____

Additional Information:

- Does the student have any medical conditions or special needs? ☐ Yes ☐ No
If yes, please specify: _____
- Emergency Contact Name: _____
- Emergency Contact Number: _____

Required Documents (Attach with Form):

- ☐ Birth Certificate Copy
- ☐ Recent Passport-size Photo (2 Copies)
- ☐ Copy of Previous Academic Records
- ☐ Parent/Guardian's NID/Passport Copy

Declaration:

I confirm that the above information is accurate and that I agree to abide by the school's policies.

Signature of Parent/Guardian: _____ Date: ____ / ____ / ____