



# HASEEN ACADEMY

WADHEE IHSAN, KATTIPARA. 673573, CALICUT DT., KERALA,  
Ph: 0495 2270870, 7025567376

## APPLICATION FORM

Serial No. .... Admission No. :.....

1. Name of the student:  
in English :  
in Malayalam :  
UID No(Adhar Number) :

2. Address .....
- .....
- District.....
- Gramapanchayath  Municipality  Corporation
- Block Panchayath.....Taluk.....District Panchayath.....
- Pin Code.....Phone Number.....Mobile.....

3. Father's name with initial :

4. Mother's Name with Initial :

5. Date & Place of birth with district :

6. Mother tongue :

7. Relationship to the Guardian :

8. Occupation of Parent or Guardian:  
and his/her annual income

9. The 'Mahallu' to which the  
candidate belongs to :

10. Name and address of two respo-  
nsible persons in your locality :

11. Two identification marks  
1)  
2)

12. Educational Qualification :  
1. Religious :  
Name of Madrasa :  
2. General :  
Name of School :  
3. Other :  
Name of Institution :

(COPY OF THE CERTIFICATES WITH MARKLIST TO BE ATTACHED)

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**DECLARATION**

I declare that the particulars given above are correct and that I will, if admitted, abide by the rules and regulations of the institution.

*Signature of Candidate*

I do hereby guarantee the conduct of my ward and full co-operation in this venture.

*Signature of the parent/Guardian*

I declare that the particulars given above are correct and that the candidate is a supporter of the Sunni organization.

*Signature of the president / Secretary of  
SYS/SSF Unit committee with seal.*

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**FOR OFFICE USE ONLY**

Admitted or not :  
No. and date of admission :  
Remarks :

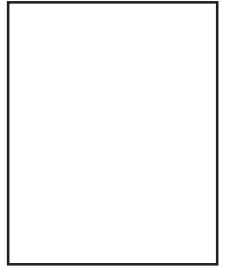
Secretary / Principal



ISLAMIC INTEGRATED STUDIES

KATTIPARA - 673573, CALICUT DT., KERALA

Ph: 0495 2270870, 7025567376



**APPLICATION FORM**

Serial No. .... Admission No. :.....

1. Name of the student as in the :

SSLC Book (in block Letters)

2. Father's Name :

3. Residential Address with

Pincode and Phone Number :

4. Blood Group :

5. Aadhar Numbers :

6. Account Numbers :

7. Date and Place of Birth District :

8. Mother tongue :

9. Relationship to the Guardian :

10. Name and address of two responsible :

Persons in your Location

11. Month and Year of passing SSLC

Exam. with Register No.

12. Educational Qualification :  
1. Religious :  
Name of Madrasa :  
2. General :  
Name of School :  
3. Other :  
Name of Institution :

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