



Student Online Admission Form

Academic Year 2026 – 2027 | Please fill out all sections carefully using BLOCK LETTERS

INSTRUCTIONS

1. Please fill the form in BLOCK LETTERS using a black/blue pen.
2. All fields marked with (*) are mandatory.
3. Attach a recent passport-size photograph of the student.
4. Submit with photocopies of Birth Certificate & previous marksheet.
5. Submit the completed form at the school office or email to info@edugates.school along with required documents.

AFFIX STUDENT'S RECENT PHOTO

(Passport size)

1 Student Information

Basic information of the applicant

FULL NAME (as per Birth Certificate) *

GENDER *

Boy Girl

DATE OF BIRTH *

DD / MM / YYYY

NATIONALITY *

RELIGION *

BLOOD GROUP *

BIRTH CERTIFICATE NO. *

A+ / A- / B+ / B- / AB+ / AB- / O+ / O-

2 Academic Information

Class & previous education

APPLYING FOR CLASS *

Tiny Tots

KG-1

KG-2

KG-3

STD-1

STD-2

STD-3

STD-4

ACADEMIC YEAR *

2026 – 2027

2027 – 2028

LAST INSTITUTE ATTENDED

LAST CLASS ATTENDED

RESULT / GRADE

REASON FOR LEAVING PREVIOUS SCHOOL

EXTRACURRICULAR INTERESTS (sports, arts, debating, etc.)

3 Health & Special Needs

Medical info for child's safety & care

ANY DISABILITY *

Yes No

TYPE OF DISABILITY (if applicable)

SPECIAL CARE REQUIRED

REGULAR MEDICATION

4 Parent / Guardian Information *Father, Mother, Address & Guardian*

FATHER'S INFORMATION

FATHER'S NAME * (same as student's birth certificate)

FATHER'S CONTACT NUMBER *

FATHER'S EMAIL

FATHER'S EDUCATIONAL QUALIFICATIONS

MOTHER'S INFORMATION

MOTHER'S NAME * (same as student's birth certificate)

MOTHER'S CONTACT NUMBER *

MOTHER'S EMAIL

MOTHER'S EDUCATIONAL QUALIFICATIONS

ADDRESS INFORMATION

PRESENT ADDRESS *

PERMANENT ADDRESS *

GUARDIAN (PRIMARY) *

Father Mother Other (If Guardian other than Father/Mother — fill below)

GUARDIAN'S NAME

RELATIONSHIP WITH STUDENT

GUARDIAN'S CONTACT NUMBER

GUARDIAN'S EMAIL

GUARDIAN'S PRESENT ADDRESS

GUARDIAN'S PERMANENT ADDRESS

5 Emergency Contact *Whom to contact in case of urgency*

CONTACT NAME *

RELATION *

PHONE NUMBER *

6 Parent Partnership Charter *Shared commitment to child's growth*

I am agreed with EduGates Parent Partnership Charter *

By agreeing, you acknowledge that you have read & commit to uphold the partnership principles between home and school. Yes No
 Full charter available at: www.edugates.school/parent-partnership-charter

DECLARATION

I hereby declare that the information provided above is true and correct to the best of my knowledge. I understand that any false information may result in the cancellation of admission.

FATHER / MOTHER / GUARDIAN'S SIGNATURE

DATE

PLACE

FOR OFFICE USE ONLY: Application No.: _____ Received By: _____
 Date of Receipt: _____ Status: _____ Remarks: _____

SUBMIT TO: EduGates Integrated School Office | Dhaka, Bangladesh
 info@edugates.school 01410247727 www.edugates.school