Data Capturing Format

for

Student Profile in Banglar Uchchashiksha

Basic details

1.	Do you have Banglar Shiksha Student ID: O YES O NO
	(If YES)
	Banglar Shiksha Student ID:
2.	Name**:
	a. First Name:
	b. Middle Name:
	c. Last Name:
3.	Date of Birth**:
4.	Gender**: (MALE,FEMALE,OTHER,NOT DISCLOSED)
5.	Social Category**:(UR, EWS, SC, ST, OBC-A, OBC – B)
6.	Religion**:(Hinduism, Islam, Christianity, Buddhism, Jainism, Parsi, Jews, Sikhism, Yehudi, Sari
	dharam, Sarna dharam, Others)
7.	Whether BPL: O YES O NO
8.	Blood Group: (A+, A-, B+, B-, AB+, AB-, O+, O-,RARE,NOT DISCLOSED)
9.	
	(If INDIA)
10.	. Aadhaar No.
11.	. Mobile No**:
	. Email Id**:
	. Whether Student Is Specially Abled: YES NO:
	(If YES)
14.	Disability Type *:
	a. ACID ATTACK VICTIM
	b. AUTISM SPECTRUM DISORDER
	c. BLINDNESS
	d. CEREBRAL PALSY
	e. CHRONIC NEUROLOGICAL CONDITION
	f. DWARFISM
	g. HEARING IMPAIRMENT (DEAF AND HARD OF HEARING)
	h. HEMOPHILIA
	i. INTELLECTUAL DISABILITY
	j. LEPROSY CURED PERSONS
	k. LOCOMOTOR DISABILITY
	I. LOW-VISION
	m. MENTAL ILLNESS
	n. MULTIPLE SCIEROSIS
	o. MULTIPLE SCLEROSIS

- p. MUSCULAR DYSPROPHY
- q. OTHERS
- r. PERKINSONS DISEASE
- s. SICKLE CELL DISEASE
- t. SPECIFIC LEARNING DISABILITIES
- u. SPEECH AND LANGUAGE DISABILITY
- v. THALASSEMIA

Family Details

- 15. Father's Name*:
 - a. Father's First Name:
 - b. Father's Middle Name:
 - c. Father's Last Name:
- 16. Father's Mobile No:
- 17. Father's Profession:
- 18. Father's Educational Qualification:
- 19. Mother's Name:
 - a. Mother's First Name:
 - b. Mother's Middle Name:
 - c. Mother's Last Name:
- 20. Mother's Mobile No:
- 21. Mother's Profession:
- 22. Mother's Educational Qualification
- 23. Guardian's Name:
 - a. Guardian's First Name:
 - b. Guardian's Middle Name:
 - c. Guardian's Last Name:
- 24. Relation with Guardian:
- 25. Guardian Mobile No:
- 26. Guardian Email ID:
- 27. Student Annual Family Income:

Address Details

Present Address

- 28. Address Line*:
- 29. Country*:
- 30. State*:
- 31. District*:
- 32. PIN:
- 33. PO:
- 34. PS:
- 35. Block/Municipality/Corporation:

O Whether Permanent Address is same as Present Address

Permanent Address

- 36. Address Line*:
- 37. State*:
- 38. Country*:
- 39. District*:
- 40. PIN:
- 41. PO:
- 42. PS:
- 43. Block/Municipality/Corporation:

PRESENT COURSE OF STUDY DETAILS:

- 44. Course Type**: (Regular, Distance)
- 45. Program Level**: (Others, Post Doctoral, PHD, MPHIL, Certificate, Diploma, UG, PG)
- 46. Program Category**: (B.A., B.Sc., B.Com. etc.)
- 47. Discipline/Subject**:
- 48. Medium Of Instruction*:

(If Program Category Selected as Others, Post Doctoral, MPHIL, Certificate, Diploma, UG, PG)