LCIC Form 2022-1-A-B

LCIC

CADET COLLEGE KASUR



ADMISSION FORM

PART - I (APPLICATION)(Form to be filled in Block Letters preferably by the student / parent / guardian)

Date:	LCI	C Regi	strati	ion Νι	umbe	er Al	llotte	ed:	2	2						
Full Name:												•			PHO	TO
Father's Name: NIC No:																. •
		-								-						
Father's Occupa	tion															
Postal Address: .																
Tel Nos:																
Date of Birth: (M	M/DD/YY	')	/_				_					A	\ge:	yea	rs	months
Place of Birth:					Cit	izen	ship	:						Religio	n:	
Recent Grade Co	mpleted:				Fro	om S	Scho	ol/C	Colleg	ge:						
Grade Applied fo	r:				Gr	ade	Curr	ent	ly St	udyir	ng in:					
School where cur	rrently stu	ıdying	;											• • • • • • • • • • • • • • • • • • • •		
Achievements: 1. Sports: 2. Extra-C 3. Others:	urricular:															
Student resides w	vith: †Fa	ther	† M	other	† F	Both	Pare	ents	†	Gua	rdian (Relatio	on)			
Guardian If the a	pplicant c	loes n	ot liv	e with	n par	ents	, plea	ase	prov	ide tl	ne info	rmatio	n abou	t guardia	n.	
Guardian's Name Guardian's NIC									C	luard	lian's 1	relatior	n with A	Applicant	:	
		-								-						
Guardian's Occu Address:											-	come: .				
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FAMILY INFORMATION

Please list all brothers and sisters in sibling order, from eldest to youngest, including the applicant:

	Name	Date of Birth	Gender	Grade Studying	Where?
1					
2					
3					
4					
5					
6					

How di	d you hear about our college?			
I certify	that the information contained in this application is complete, true and correct	t to the bes	t of my k	knowledge.
Docum	ents Attached:			
a.	Five recent passport size photographs in blue background.	YES	NO	LATER
b.	Result Card of Last Examination Passed.	YES	NO	LATER
c.	Copy of NIC of the father/guardian of the applicant.	YES	NO	LATER
d.	Attested copy of Form B.	YES	NO	LATER
e.	Medical fitness Certificate along with Lab Reports. (Specimen Attached)	YES	NO	LATER
f.	Character Certificate from Last Institution.	YES	NO	LATER
	(Submission of correct documents is the sole responsibility of appli-	cant/parent	/guardiai	n)

Signatures/Name of Applicant

Signatures /Name of Father/Guardian with NIC No.														
				-									-	

- 1. Application duly completed should be sent on following address through Pakistan Postal Service registered mail.
- 2. Date and Time for the test / interview will be intimated through Tel / WhatsApp / Postal Mail Service subject to the availability of seats in the grade applied for.

Postal Address: LCIC Cadet College Kasur, 13 KM Raiwind Kasur Road, Post Office Raokhanwala, District Kasur. Tel Nos: 0321/0342/0346/0336 444 1844.