



No.:

ADMISSION FORMApplicant's
Latest
Photograph

1. Name of the Student:

Gender: Date of Birth:/...../..... Nationality:

Qatar ID No: E-mail of the Student:

2. Name of Father:

Qatar ID No:

Occupation / Designation: Employer:

Contact:- Office: Resi: Mobile:

E-mail of Father:

3. Name of Mother

Occupation / Designation: Employer:

Contact:- Office: Resi: Mobile:

E-mail of Mother:

4. Class admitted to:

Name of school in which the student is studying:

5. Academic performance in the previous class:

(for students seeking admission to class VIII / IX / X)			
Class: (VII / VIII / IX)	Maths	Science	English

(for students seeking admission to class XI / XII)			
Class: (X / XI)	Phy	Chem	Maths

6. Course / Subject opted

Class VIII / IX / X- Class XI / XII-

7. Medical History:- Blood Group: Any chronic illness (Asthma, Epilepsy, TB etc)

8. Name and course of siblings, if any at BEC:

9. Address for correspondence:

QATAR
.....
.....
Area of Resi:
Tel No:
Mob No:

NATIVE
Country:
State:
District:
Tel No:
Mob No:

10. Fee Payment and Refundable Policy:

- (a) Fee will be collected in two installments.
- (b) Full fee for each term should be remitted at the beginning of the term.
- (c) 100% Fee refund before commencement of the courses.
- (d) 75% refund after 2 weeks after commencement of the classes.
- (e) No Fee will be refundable if discontinued after month of the commencement of the classes.
- (f) Fee paid for one course will not be adjusted against any other course.
- (g) Refund, if any will be done upon the produce of the original receipt issued by the institute.

DECLARATION

I hereby certify that the information given above is complete and accurate to the best of my knowledge and belief. I also certify that I have read and understood the rules and regulations and the Fee Payment Policy of institute and fully agree with the same. I also declare that if I achieve outstanding results in any examinations, the institute will have all rights to use my result and photograph for its growth strategies and developmental plans. In such case I will never have any objections or protest.

Signature of the Parent:

Date:

Signature of the Student:

Date:

FOR OFFICE USE ONLY

Admitted to: Fee effect from:

Course						Total
Amount						

Signature of the Director:

Date: / /

Documents required:

1. Copy of the student's residence permit.
2. Copy of mark sheets of the last passed out class
3. Two passport size photograph of the student