

BABULAL NAGARMAL SATNALIKA FOUNDATION

Promoting Education

Annual Control of the	(Fill the form in block letters only	WILLI BLUE/BLACK II	IK)
Name			
Email Id:			
Date of Birth:			
Category:	Sex:		
Father's Name:		Pa	aste your Photograph
Mother' Name:			here
Guardia <mark>n's Na</mark> me			
(If Father is not the Guardian):			
Can <mark>did</mark> at <mark>e's Contact Nu</mark> mber:			
Total Joint Gross Annual Income:		Hall Street	
Present Address:			
Permanent Address:			
Pursuing Degree:			
Present Institution:		20033	Paul
Qualification:	7,500	THE RESERVE	100 MAC
Degree	School/University Name	Year of Passing	% Marks Obtained
- P			N all
			7.000
			A STORY
		70072	
Bank Name:			
Bank Account Number:			William Property
Account Holder's Name:			
Bank Branch Name:			A. Carrier
IFSC Code:		A 8500	
Additional Information (if any):			
	pplication form are correct and best of e will be cancelled and the foundation's	The second secon	
Date:	Signature:		

Send the filled in forms to:

Babulal Nagarmal Satnalika Foundation

C/o Mr. Debi Prasad Satnalika

92 M.G Road | Raniganj- 713347 | Dist-Burdwan | West Bengal | India

Or E-mail the form to: niraj.satnalika@bnsatnalikafoundation.org For more Information, visit us at: www.bnsatnalikafoundation.org