

| LCI তথ্য ফর্ম | | একটি IMSLCB উদ্যোগ | | | | | | | | Picture | | | | |
|--|----|--------------------|----|---------|----|-------------|----|----|----|---------------|-----|-----|-----|---|
| 1. Personal Information | | | | | | | | | | | | | | |
| Name | | | | | | | | | | | | | | |
| | | | | | | | | | | Date of Birth | Y | Y | Y | Y |
| | | | | | | | | | | | | | | |
| Mother's/Father's Name | | | | | | | | | | | D | D | M | M |
| | | | | | | | | | | | | | | |
| Personal Cell No. | | 0 | 1 | | | | | | | | | | | |
| EIIN | | | | | | | | | | Status | T/S | Sex | M/F | |
| Level | | | | Section | | | | | | Roll No. | | | | |
| Sub/Group Code | | | | | | | | | | | | | | |
| Parent's Cell No. | | | | | | | | | | | | | | |
| 2. LCI Information | | | | | | | | | | | | | | |
| LCI : Use only 0, 1 or 2 in the blank boxes bellow the printed numbers | | | | | | | | | | | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | |
| | | | | | | | | | | | | | | |
| 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | |
| | | | | | | | | | | | | | | |
| 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | |
| | | | | | | | | | | | | | | |
| 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 | 55 | 56 | |
| | | | | | | | | | | | | | | |
| 57 | 58 | 59 | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | |
| | | | | | | | | | | | | | | |
| Date : | | | | | | Signature : | | | | | | | | |

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|--|----|--------------------|----|---------|----|----|-------------|----|----|---------------|-----|-----|-----|---|
| 1. Personal Information | | | | | | | | | | | | | | |
| Name | | | | | | | | | | | | | | |
| | | | | | | | | | | Date of Birth | Y | Y | Y | Y |
| | | | | | | | | | | | | | | |
| Mother's/Father's Name | | | | | | | | | | | D | D | M | M |
| | | | | | | | | | | | | | | |
| Personal Cell No. | | 0 | 1 | | | | | | | | | | | |
| EIIN | | | | | | | | | | Status | T/S | Sex | M/F | |
| Level | | | | Section | | | | | | Roll No. | | | | |
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| | | | | | | | | | | | | | | |
| 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | |
| | | | | | | | | | | | | | | |
| 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | |
| | | | | | | | | | | | | | | |
| 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 | 55 | 56 | |
| | | | | | | | | | | | | | | |
| 57 | 58 | 59 | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | |
| | | | | | | | | | | | | | | |
| Date : | | | | | | | Signature : | | | | | | | |