

LC	LCI তথ্য ফর্ম একটি IMSLCB উদ্যোগ									Picture					
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	Name														
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Mot	Mother's/Father's Name								Date of Birth		D	М	М		
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Pers	Personal Cell No.			1											
EI	EIIN								Sta	tus	T/S	Sex	M/F		
Level			Sec	tion				Roll	No.						
Sub/Group Code															
Parent's Cell No.															

## 2. LCI Information

LCI :	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	
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Date :						Signature :								



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