



**BRIHASPATI
VIDYASADAN**

+ 2 PROGRAM

ADMISSION FORM

Please affix one PP photo here and submit two PP size photo extra with this form

SECTION A: Student's Personal Information (PLEASE FILL IN BLOCK LETTERS)

Student's Name

विद्यार्थीको नाम (देवनागरीमा)

Date of Birth DD MM YY YY BS DD MM YY YY AD **Gender** M F

Mobile No. **E-mail**

PREVIOUS SCHOOL DETAILS

Name of the School	Address	Contact	Board	Year	GPA Obtained

SECTION B: Please select the applied faculty and its elective.

FACULTY	ELECTIVE
<input type="checkbox"/> Science	<input type="checkbox"/> Computer <input type="checkbox"/> Biology Other <input type="text"/>
<input type="checkbox"/> Management	<input type="checkbox"/> Computer <input type="checkbox"/> Business Studies <input type="checkbox"/> H.M. Other <input type="text"/>

Academic year enrolled for _____

SECTION C: Address

Permanent	
Country <input type="text"/>	Province <input type="text"/>
District <input type="text"/>	Municipality/ Rural Municipality <input type="text"/>
Ward No. <input type="text"/>	Street/ Tole <input type="text"/>
Current (if different from permanent)	
Country <input type="text"/>	Province <input type="text"/>
District <input type="text"/>	Municipality/ Rural Municipality <input type="text"/>
Ward No. <input type="text"/>	Street/ Tole <input type="text"/>

