

Hattiban, Lalitpur, Nepal Tel: +977 1 5251 294, 5251 306 kusoa@ku.edu.np www.ku.edu.np/arts

APPLICATION FORM 2022

Passport size Photograph

☐ General ☐ Provisional

Form No.:																		
Name of Applicant:		La	st Nam	e				F	First Na	me	Ι	Ι		Mide	dle Na	ıme	Ι	
(Number your top three priorities as 1 st , 2 nd , and 3 rd)																		
Bachelor in Community Development (BCD) Bachelor in Media Studies (BMS) Bachelor in Economics (BECO) Bachelor in Yogic Sciences and Wellbeing (BYSW)																		
General Instructions to the Applicant 1. Complete the application form as presented. 2. Attach certified copies of original transcripts (high school onwards) along with the application form. 3. Submit an application letter explaining why you want to join the program.																		

Correspondence

All correspondence relating to admissions should be addressed to:

4. Submit this application with a non-refundable application fee of NRs. 1000/-.

Dean School of Arts Kathmandu University

Document Submission Checklist (To be submitted along with the form)

S.N.	Documents	Tick	Remarks
1	Application Letter		
2	Application Form		
3	Passport-size Photo (3 copies)		
SLC c	r Equivalent Certification	•	
4	Attested copy of Mark Sheet		
5	Attested copy of Character Certificate		
+2 or	Equivalent Level Certification	•	
6	Attested copy of Transcript		
7	Attested copy of Mark Sheet		
8	Attested copy of Character Certificate		
9	Attested copy of Citizenship (Passport copy for foreign students)		
10	Application and entrance exam fee NRs. 1000/-		

SCHOOL OF ARTS FOUR-YEAR UNDERGRADUATE PROGRAM

APPLICATION FORM

	<u>/ (() 2 0/ (0 () 0 () (</u>						
1.	I hereby apply for admissions to	the Bachelor i	າ				
	offered by School of Arts, Kathmand rules of the University.					regulations, co	onditions
2.	Personal Details (use BLOCK LET	ERS)					
	Last Name		First Nam		Middle Nai	me	
	Date of Birth:	A.D. _{YYYY}	DD MM	B.S	. Nationali	ty:	
	Sex: Male Female Othe						
	Father's Name:				Occupati	on:	
	Mobile No:		E-mail:				
	Mother's Name:				Occupati	on:	
	Mobile No:		E-mail:				
	Parent's Name:		-			on:	
	Parent's Contact Resi.Tel:				No:		
	Correspondence Address			Permanent Ad			
	Tel: E-mail: _		·	Tel:	E-mail:		
3.	Education						
	List in chronological order the sc	nools you have	e attended, be	ginning from SLO		Porcontago	Dates
	School/College	Board	Major	Subjects	Degree Earned	Percentage or CGPA	
	Accords and December						
4.	Awards and Recognition List all significant scholarships, av	wards, and aca	ndemic prizes y	ou have receive	d since high schoo	ol.	

5. Activities

6.

List any major activity you have taken part in since high school.

Name of Activity	Description	Date of Participation
Other Details	. C	
Add any other information which you believe ma	ay influence our decision on your application.	

Only for foreign students	
Country of citizenship:	Type of visa:
Local contact person:	
I hereby certify that the information given	above is complete and accurate.
I hereby certify that the information given	above is complete and accurate.
I hereby certify that the information given	above is complete and accurate. Date:
I hereby certify that the information given Signature of Applicant	

Verified by	Approved by
Name:	Name:
Designation:	Designation:
Date:	Date:



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Kathmandu University School of Arts' Admission Test (KUSAAT) -2022 For four-year Undergraduate Programs

ENTRANCE EXAM ID C	ARD
Program applied for:	
Last Name First Name	Middle Name
Date of Birth: A.D. DD MM YYYY DD MM YYYYY	B.S.
Email:	Mobile No:
	Examination Centre (For official use.):
Applicant's Signature:	School of Arts, Hattiban, Lalitpur
	School of Arts, Balkumari, Lalitpur
Coordinator, KUSAAT central committee	
4	
Kathmandu University School of Arts Hattiban, Lalitpur, Nepal Tel: +977 1 5251 294, 5251 306 Kathmandu University School of Arts' Admission Test (KUSAA' For four-year Undergraduate Programs	Photograph
INTERVIEW ID CARI	
Program applied for:	
Last Name First Name	Middle Name
Date of Birth: DD MM YYYY A.D. DD MM YYYY	B.S.
Email:	Mobile No:
	Examination Centre (For official use.):
Applicant's Signature:	School of Arts, Hattiban, Lalitpur
	School of Arts, Balkumari, Lalitpur
Coordinator, KUSAAT central committee	

Symbol No: