Kopila Valley School

Where future possibilities become the reality of today.

Application Form: Management Program

PERSONAL INFORMATION

Name of the Applicant (in English): _____

नाम (देवनागरिमा) : _____

Date of Birth in AD ((According to SLC records): _____ Gender: Male ☐ Female ☐

Day / Month / Year

Date of Birth in BS: _____

Day / Month / Year

CONTACT INFORMATION

Permanent Address: _____

City or Village & Ward # / District / Country

_____

Local/ Temporary Address: (If it is the same as your permanent address, write 'SAME AS ABOVE'.)

_____

City or Village & Ward # / District / Country

_____

Applicant's Telephone number/Mobile number: _____

Parents & Guardian Information:

Father' Name: _____ Father's Phone No.: _____

Mother's Name: _____ Mother's Phone No: _____

Local Guardian's Name: _____ Local Guardian's Phone No: _____

Person to be contacted during Emergency

Emergency contact person: _____ Phone Nos: _____

_____   _____

Name of the person responsible for the student (the person who communicates with Kopila Valley School and is responsible for paying the fees):

Name: _____

Phone No: _____

Relationship to the student: _____

Occupation: _____

Telephone number / Mobile number: _____

Email: _____

EDUCATIONAL HISTORY

List the schools the applicant has attended beginning with the most recent school.

Name of the School	Class (From-To)	Dates of Attendance (From-To: Month & Year)	Address (City, District & Country)

Academic Records

Class / Board or Equivalent	Aggregate GPA	GPA in English	GPA in Maths	GPA in Accounts / Economics (if taken during school)
Class 8				
Class 9				
SEE				

Have you been awarded any scholarship? Yes   No

If yes, please give details of the scholarship/s (including the basis and amount/s of the scholarship/s awarded}

Scholarship	Amount Awarded

OTHER DETAILS

List major awards and certificates received:

Award / Certificate	Date Awarded

Clubs, organizations, sports and/or extra-curricular activities: *(Please indicate duration and describe your participation .)*

Clubs, Organizations, Sports, Extra-curricular Activities	Description of Participation

Volunteer Experience:

Have you ever volunteered for an organization or done community service?   Yes   No

If yes, please list organizations, indicate how long you were or have been involved in each, and describe your participation.

Volunteer Experience / Dates	Description of Volunteer Responsibilities

Future Goals:

What are your future plans - college or university plans and career goals?

_____

_____

_____

_____

_____

Have you repeated any class or grade or level? Yes   No

If yes, please specify class or grade or level and reason(s) for repeating:

_____

_____

_____

Have you ever been suspended or dismissed from school for any reason?   Yes   No

If yes, please provide specific details:

_____

_____

_____

_____

MANAGEMENT PROGRAM PREFERENCES

Optional Subject Preference for Management Program: [Required Subjects: English, Nepali, Account1•..'   1omics]

Choose any ONE optional subject: Business Studies   Computer Science

Please indicate if you require special education attention for conditions including physical challenges, learning difficulties, speech delays, hearing impairments. emotional or behavioral difficulties or chronic health issues including allergies.

_____

_____   _____

_____

_____

Do you routinely take medication? Yes   No

If yes, please indicate medication(s), dosage, reasons for the medication(s}, how long have you been taking medication(s).

_____

_____

_____

_____

How did you come to know about Kopila Valley School?

_____

_____

PLEASE SUBMIT THE FOLLOWING DOCUMENTS ALONG WITH THIS APPLICATION FORM:

1. Photocopies of mark sheet of Grade 8 Board and Class IX
2. Photocopies of the grade sheet of SEE/Equivalent
3. Photocopies of documents related to SEE/Equivalent certification
4. Photocopies of the documents related to any rewards, certificates, and special contributions

(All the documents need to be verified and originals produced at the time of admission)

Declaration:

I wish to be considered for admission to Management Program at Kopila Valley School.

I declare the information supplied in this application and the documentation supporting it is true and complete.

_____   _____   _____

Signature of the applicant   Signature of the parent/guardian   Date of application