



# KATHMANDU UNIVERSITY HIGH SCHOOL

Chaukot, Kavre

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Hotline: 9860 897 750

Administration: 011-490561

Account Section: 011-490395

## Student Profile

Current Photo  
pp size

Name: \_\_\_\_\_

Class: \_\_\_\_\_ Sec: \_\_\_\_\_ Gender: \_\_\_\_\_

Date of Birth (A.D): \_\_\_\_\_ (Day/Month/Year)

Date of Birth (B.S): \_\_\_\_\_ (Day/Month/Year)

Hosteller  Day scholar

Blood Group: \_\_\_\_\_ House: \_\_\_\_\_ Bus Route: \_\_\_\_\_

Name of Previous School: \_\_\_\_\_

Telephone No of Previous School: \_\_\_\_\_

History of Past Illness: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Mobile No: \_\_\_\_\_

Email ID: \_\_\_\_\_

Expertise (if any): \_\_\_\_\_

**[If KU/DH family] Designation:** \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Mobile No: \_\_\_\_\_

Email ID: \_\_\_\_\_

Expertise (if any): \_\_\_\_\_

**[If KU/DH family] Designation:** \_\_\_\_\_

Current Address: \_\_\_\_\_

Contact No. (Home): \_\_\_\_\_

Local Guardian (if any): \_\_\_\_\_ Phone No: \_\_\_\_\_

Address: \_\_\_\_\_

Parents Signature

Name: .....