



KATHMANDU UNIVERSITY HIGH SCHOOL

Chaukot, Kavre

Email: kuhs@ku.edu.np
Post Box: 529 (Banepa)

Administration: 011-490561
Account Section: 011-490395

Student Profile

Student's Name: _____

Class: _____ Section: _____ 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: _____

Number for SMS (Only one number): _____ *(If changed notify immediately)*

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): _____

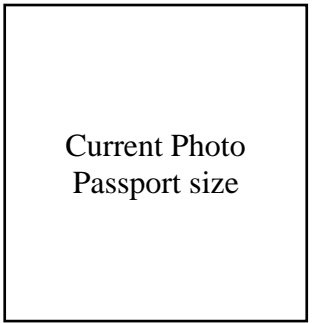
(If KU/DH family) Designation: _____

Current Address: _____

Contact No. (Home): _____

Local Guardian (if any): _____ Phone No: _____

Address: _____



Parent's Signature

Name: _____