



Kathmandu University
 School of Arts
 Center for Art and Design
 Hattiban, Lalitpur, Nepal
 01-5250462, 01-5251306
info@kuart.edu.np / www.kuart.edu.np

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**Application for Admission
 Bachelor of Fine Arts | BFA | Fall 2017**

(Note: Do not leave any field empty. Write 'N/A' if not applicable)

Personal Information (Use BLOCK LETTERS)

Last name.....First name.....Middle name.....

Other last name under which records may appear.....

Date of birth..... B.S. A.D.

mm/dd/yy

mm/dd/yy

Gender: Female Male

Marital Status: Single Married

Are you a Nepali Citizen?

Yes No..... Visa status.....

Mother's Name.....

Occupation / position/ institution.....

Telephone/ Mobile..... Email.....

Father's Name.....

Occupation/ position / institution.....

Telephone/ Mobile..... Email.....

Local Guardian.....

Occupation/ position / institution.....

Telephone/ Mobile..... Email.....

Your relationship to your guardian.....

Mailing Address (*Admission decisions will be sent here*)

Street.....

City..... District.....

Post Box No.....

Foreign country (*if applicable*).....

Daytime telephone.....

Mobile.....

Email address.....

Permanent Address

.....

.....

Telephone.....

Local Address (*You are required to inform the office about the change of your local address*)

.....

.....

Telephone.....

Academic Qualification

School Leaving Certificate / Equivalent

Institution.....
City/District..... Division.....
Date..... Subjects.....

Higher Secondary / Equivalent

Institution.....
City/District..... Division.....
Date..... Subjects.....

If any other

Institution.....
City/District..... Division.....
Date..... Subjects.....

Individuals asked to send Recommendations

- 1.....
- 2.....
- 3.....

Honours, Achievements, Awards (if any)

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How did you know about KU Art + Design?

- Internet Family Friend
- Advertisement / Media / Please mention which.....
- Student's Activities, Please mention.....
- Any other, Please mention.....

What do you intend to pursue at KU Art + Design as your specialization?

- Graphic Communication Studio Art I am not sure

Who or what influenced your decision to apply to this program?

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.....

Have you received art training from any institution or tutor?

If yes, please mention:

Institution / Tutor.....
Duration.....
Date.....

Are you employed?

- No Yes (if yes please mention)
- Institution or Company.....
- City.....
- Working days / hours..... How long will you continue this job?

Who will support you financially for this course?

Name.....
Relationship to applicant.....
Address.....
Occupation.....
Institution / Company.....
Telephone..... Mobile.....
Email.....

.....
Signature Date.....

Please note that the applicant has referred your name as the financial supporter for the course.
Your signature will bear your assurance to the applicant's reference. Thank you for your cooperation.

If more than one financial supporter is available:

Name.....
Relationship to applicant.....
Address.....
Occupation.....
Institution / Company.....
Telephone..... Mobile.....
Email.....

.....
Signature Date:.....

Please note that the applicant has referred your name as the financial supporter for the course.
Your signature will bear your assurance to the applicant's reference. Thank you for your cooperation.

To applicant Note: Attest all official documents

Please enclose herewith this application form

- A photocopy of S.L.C. Mark sheet.
- Character Certificate of Grade 10
- A photocopy of High School / A Level / +2 Mark sheet
- Character Certificate of Grade 12
- A copy of citizenship
- Portfolio (*documentation of your artwork, art activities that you have been involved or collection of documentations of art & artist of your interest / gallery visits to create a scrapbook*) Check Application Procedure for details
- Personal Statement (*it may include your reasons behind studying art, what you hope to contribute being an artist, your professional goal, your particular reason for choosing KU Art + Design your expectations at KU Art + Design*)
- Recommendation Letters
- Other relevant documents

I certify that the information given on this form is complete and accurate.

Signature of applicant..... Date.....

Signature of guardian..... Date.....

To Applicant: Copy this form as needed.

Letter of Recommendation (Confidential)

Name of the Applicant.....

Proposed program.....

Name of the Referee.....

To the Referee

We would appreciate your opinion of this applicant's potential for the course, including comments on strengths and weaknesses, creativity, initiative and aptitude for advanced study. For how long and in what capacity have you known the applicant? Any other relevant information you care to include will be welcomed. If you prefer to write a personal letter rather than use this form, please feel free to do so and attach this form to your letter. We shall not disclose your valuable remarks to the applicant and we may contact you directly to inquire further about the applicant if necessary. Your prompt reply will be sincerely appreciated. Thank you.

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Signature.....Date

Position, institution, address.....

Telephone..... Mobile

Email:.....

We do not entertain open recommendation letters. Please return to the applicant in an envelope and sign across the seal. Thank you.