

**Kathmandu University
Dhulikhel, Kavre**

**Child
KUHS Seat Reservation Form**

Child Information

Name : _____ In Devanagri: _____

Gender: Male/Female Date of Birth: _____ Place of Birth: _____

Age: _____ By: _____

Parent Information

Name: _____ Position: _____

Central/School: _____ Department/Section: _____

Date of Joining: _____ Service Type: Permanent/Contract

Date of Permanent: _____ Service Year: _____

Admission For

Class: _____ Year: _____

A-Level:

Stream: _____ Year: _____

Signature of Parent: _____

Date: _____

Note: Birth Certificate is Compulsory.