



## Application Form for BBA/BBIS Fall 2026

Program Applied For: <input style="width: 100%;" type="text"/>  Symbol Number: <input style="width: 100%;" type="text"/>  Exam Center: LACM	<p><b>If yes to the following questions, please tick the box</b></p> Are you waiting for the result of Intermediate Final Exam? Yes <input type="checkbox"/> No <input type="checkbox"/>  How did you know about the call for admission? Newspaper <input type="checkbox"/> Website <input type="checkbox"/> Social Media <input type="checkbox"/> Friends/ Family <input type="checkbox"/>	Attach a recent passport size photo here.
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*Please print in black. Give clear, concise and complete information in each case as required. Read and follow carefully all directions. Use additional sheets if necessary.*

<b>Personal Details:</b>	1 Full Name (In Block Letter):	
2. Date of Birth	In BS: Day      Month      Year	In AD: Day      Month      Year
3. Nationality:	5. Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> Others <input type="checkbox"/>	7. Ethnicity: Brahmin/Chhetri <input type="checkbox"/> Janajati <input type="checkbox"/> Dalit <input type="checkbox"/> Madhesi <input type="checkbox"/> Others, Specify: _____
4. Citizenship Number:	6. Mobile No..... Email:	
Parents/ Guardians Details: 8. Father's/ Guardian's Name: Occupation: Organisation: Mobile Number: Email:	9. Mother's Name: Occupation: Organisation: Mobile Number: Email:	10. Permanent Address as in citizenship Province                      District: Ward:                          Toile:  11. Current Address: Province                      District: Ward:                          Toile:

**Educational Attainment**

12. SEE or Equivalent (10 years schooling)			
Board or University	Country	Year Passed	Percent or Grade Obtained
13. Intermediate, + 2 or Equivalent (Two years after 10 years schooling)			
Board or University	Country	Year Passed	Percent or Grade Obtained

**Other Information (Attach additional sheet if required)**

14. Work Experience (if applicable with the most recent first)				
Organization	Address	Designation	Period (From - To)	Responsibility
15. Award and Recognition (If any)				
Award			Award Agency	

**Student Undertaking**

I pledge that the information I have given in this application form is correct to the best of my knowledge. I understand and accept that any wrongful representation of information will result in automatic disqualification for my admission to the program and dismissal from the program and the college if already admitted. I hereby apply for admission to LACM's BBA/BBIS program, affiliated to Kathmandu University. If accepted as a student, I will comply with all the rules, regulations and conditions of the college and University.

**Applicant's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_