

७ रट.पर्वीट.पर्व्च नश्चिट.शक्त्र.चर्गी

श्वापर्चेयाम्भित.यह्रथ.याञ्च्यात्तवाश्च्यःङ्गी

College of Natural Resources Royal University of Bhutan

Affix passport

Application Form for Admission

PERS		earch in Natural Resources Manage ase type your answers or write in blo		
1.	Name Mr./Mrs./Miss	ise type your unswers or write in ore	sen teners)	
	First	Middle	Last	
2.	Current Mailing Address			
3.	Telephone /Mobile No	Fax		
4.	Permanent Address			
5.	Email Address			
6.	Emergency Contact : Name		— Mobile No.	
7.	Sex: Male (), Fema	ale ()		
8.	Date of Birth (Day/Month/Y	ear)		
9.	Marital status: Single/Marrie	ed		
. ACA	DEMIC QUALIFICATIONS	(Provide names of all universities as	nd colleges you have attended	, listins
		ficial transcript of academic record		
		olication documents. University-atte		
	ssion is confirmed).		<u> </u>	
Name	e of University/Institution &	Degree/ Major Subject/ Dates	GPA/GPF/Class Rank/So	cholast
Locat	tion(City/Country)	Studied	Honors	
		dicate how you intend to finance yo	= *	relevai
		ndicate how you intend to finance you me and address of funding source, if	= *	relevar
1	documentation including nar	me and address of funding source, if	fany). (Please attach	
1 . MED	documentation including name		(Please attach fany). ry. List physical handicaps, re	
). MED treatn	documentation including nate documentation including nate of the documentation including nate of the document of the documentation including nate of the documentation includi	me and address of funding source, if arize your health and medical historists, mental health indicators or oth	(Please attach fany). ry. List physical handicaps, reservelevant information)	cent
. MED treatr To th accur	documentation including nate documentation including nate of DICAL STATUS (Please summer than the properties of my knowledge, I certificate. I understand that giving false.	me and address of funding source, if	(Please attach f any). ry. List physical handicaps, reper relevant information) this application is true, completele for admission to the College	cent
To th accur Natur	documentation including name documentation including name of the documentation including name of the document by a Physician or psychiatrate best of my knowledge, I certificate. I understand that giving falso all Resources, Royal University	me and address of funding source, if arize your health and medical historists, mental health indicators or other by that the information contained in the information will make me ineligible.	(Please attach fany). ry. List physical handicaps, reper relevant information) this application is true, completele for admission to the Colleges missal from the Institute.	cent
To th accur Natur	documentation including nate documentation including nate of the document of t	me and address of funding source, if arize your health and medical historrists, mental health indicators or other by that the information contained in the information will make me ineligible of Bhutan and/or face immediate displaced by the displaced by the contact details:	(Please attach f any). ry. List physical handicaps, reper relevant information) this application is true, complete for admission to the Colleges missal from the Institute.	cent
To th accur Natur	documentation including nate of the documentation including nate of the document by a Physician or psychiatric element element by a Physician or psychiatric element eleme	me and address of funding source, if arize your health and medical historrists, mental health indicators or other by that the information contained in the information will make me ineligible of Bhutan and/or face immediate displaced. Date	(Please attach f any). ry. List physical handicaps, reper relevant information) this application is true, complete for admission to the Colleges smissal from the Institute.	cent ete and ge of
To th accur Natur	documentation including name documentation including name of the document by a Physician or psychiatric elebest of my knowledge, I certificate. I understand that giving falso al Resources, Royal University enture Phone: +975-2-37 Katel (DRIL), email: om.cnr@ed	me and address of funding source, if arize your health and medical historrists, mental health indicators or other by that the information contained in the information will make me ineligible of Bhutan and/or face immediate discussion. Contact details: Contact details:	(Please attach f any). ry. List physical handicaps, reper relevant information) this application is true, complete for admission to the Colleges smissal from the Institute.	cent ete and ge of
To th accur Natur Signa	documentation including name documentation including name of the document by a Physician or psychiatric elebest of my knowledge, I certificate. I understand that giving falso al Resources, Royal University enture Phone: +975-2-37 Katel (DRIL), email: om.cnr@ed	me and address of funding source, if arize your health and medical historrists, mental health indicators or other by that the information contained in the information will make me ineligible of Bhutan and/or face immediate displayed by Date	(Please attach f any). ry. List physical handicaps, reper relevant information) this application is true, complete for admission to the Colleges smissal from the Institute.	cent ete and ge of du.bt