

SCHOLARSHIP APPLICATION FORM

Name of applicant

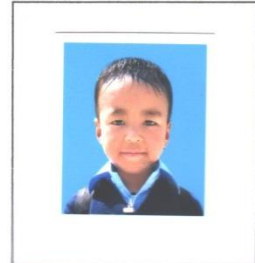
Noyal Shrestha

Date of birth

2020 June 5

Residence

Solududhkunda Municipality Word No. 4
Solukhumbu District Kosi province, Nepal



Name of sister

No

Name of brother

No

Father name

Tikaram Shrestha

Age

31

Profession

Agricultural

Mother name

Mina Shrestha

Age

31

Profession

Agricultural

School name

phaplu Community Secondary School

Class E.C.O.D

Parents phone no 9842929573 or

Contact person phone no

Favorite color White, Black

Animal Dog

Flower Rhododendron

Vision of dream Engineer

I like to study / yes or no

Here you can write down what you like to your sponsor (greetings)

I am writing this letter to request you to sponsor
for my study. If agree to give me the sponsor then
I can study good. My future will be good with
your help. I can become a good person with your help.
I trust that you will support for my study.
Thank you!