

STUDENT RECORD FORM

Name: _____
First
Middle
Family

Temporary Address: _____

Permanent Address: _____

Date of Birth: _____ (DD/MM/YY) Email Address: _____

Tel. No : _____ Mobile No: _____

Have you applied for any VISA before (which type and when) : _____

Purpose for Applying: _____

If applying for Visa

Type of Visa	Country	Preferred Subjects

Academic Qualification:

Qualification	University	Year	% of Marks Obtained

Training:

Name of Training	Duration	Institution	Year

Work Experience:

Name of Company	Designation	Total Exp. In months

TOEFL/IELTS Details: _____

Skills: _____

Fees Settled: _____ Fees Paid: _____

Receipt No: _____ Balance Amount: _____

I have thoroughly gone through the terms and conditions on the subject and agree to abide by them.

Date: _____ Signature of Applicant: _____

Date: _____ Signature of Guardian: _____