



Apollo Bhutan Institute of Nursing
(Under Apollo Bhutan Education Pvt Ltd)
Level 1-4, White House Apartment Complex #1
Khachen Lam, Thimphu Bhutan

Half Photo

Admission Registration Form
(_____ Academic Year)
(Please fill in with block letters)

Student Admission number

(For office use only)

A: Applicant Information

1. Class XII Index Number:

2. Full name (First, Middle and Last):

3. Date of Birth (Date/Month/Year)

4. Sex (Male or Female):

5. Nationality:

6. CID No:

7. Permanent Address (Village, Gewog, Dzongkhag):

8. Email:

9. Mobile No:

B: Parent/Guardian Information

(Provide details of the person who will be responsible for paying your fees).

1. Full name (First, Middle and Last):

2. Relationship (Father/Mother/Uncle/ etc.)

3. Occupation:

4. CID No:

5. Email:

6. Phone Number

APOLLO BHUTAN Admission Registration form for _____ Academic session

www.apollobhutan.edu.bt Phone: +975 17120008/ 17120222

I certify that all the information and the documents provided are correct and valid. I accept that I will be liable to any legal actions and my admission will be rejected if the information and the documents submitted are found to be false.

Full name of applicant

Signature

Date

D. Checklist of documents to be submitted

1. Photocopy of Class XII Certificate and Mark Sheet (original will be verified)
2. Photocopy of Class X Certificate and Mark Sheet (original will be verified)
3. Photocopy of CID or Letter received from Immigration/Census & Civil Registration
4. Photocopy of CID of Parents / Guardian
5. Character Certificate Copy (original will be verified)
6. Medical Certificate Copy (original will be verified)
7. Security Clearance Copy (online)
8. Two recent Passport photograph (May be submitted after joining if you are sending scanned copies of your documents).

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