

S.No.:

# Silver Mountain

## School of Hotel Management

*"Freedom with Responsibility"*

### Application for Admission

Photo

Name (in BLOCK LETTER): \_\_\_\_\_

Program Title: \_\_\_\_\_

Check One ☐ Mr. ☐ Mrs. ☐ Miss ☐ Master ☐ Others

Student ID Number \_\_\_\_\_

Please type or print clearly in black

Name:

Sur Name (as in passport)

First

Middle Name

(B.S.)

Day:

Month:

Year:

Date of Birth:

(A.D.)

Day:

Month:

Year:

Male

Female

Other

Present Mailing Address:

Nationality on Birth:

Permanent Address:

Country:

Tel No.:

Mobile No.:

Email Address:

Marital status:

Country of Citizenship:

Citizenship No.:

Place and Date of Issue:

Passport No.:

Place and Date of Issue:

**Silver Mountain School of Hotel Management**

P. O. Box: 8856, Lainchaur, Kathmandu, Nepal

Tel: 977-1-4415038, 4429151, 4412584

Fax: 977-1-4444086

E-mail: [admission@silvermountain.edu.np](mailto:admission@silvermountain.edu.np)

Website: [www.silvermountain.edu.np](http://www.silvermountain.edu.np)

## School of Hotel Management

Which program do you wish to register ? (Please check one only)

- ☐ Bachelor in Hospitality Management
- ☐ Diploma in International Culinary Arts
- ☐

Specialisation Course: (Specify) \_\_\_\_\_

Give the names and addresses of all secondary schools/university/college you have or will have attended prior to entering SMSH:

Name	City/State/Country	From/to (date)	Diploma/Certificate	Date received

Have you worked on a full-time basis or part-time/internship ?

☐ No

☐ Yes

If yes, for how many years:

A resume is optional, although helpful for your application. If you have worked on a full-time basis, give the following information on an attached C.V./resume: Name and Address of your employer(s), date of employment, your job title and a description of your duties.

How did you first learn about Silver Mountain School of Hotel Management ?

☐ SMSH Friend ☐ Ex-SMSH student ☐ Social Media (Specify)

☐ From School ☐ Advertisement (please specify where) ☐ Educational Fair

☐ Others ☐ Website ☐ CMAT/Bridge Course Center

Parents' details:

Father's Name:

Mother's Name:

Profession:

Profession:

Present Mailing Address:

Country:

Tel No.:

Mobile No.:

E-mail Address:

In case of Emergency: Name:

Mobile No.:

Local Guardian Name:

Relation:

Mobile:

Email:

## School of Hotel Management

### Checklist for applicants:

- |  |  |
|--|--|
| <input type="checkbox"/> Completed Admission Application | <input type="checkbox"/> 2 copies of Passport photos             |
| <input type="checkbox"/> School Certificates             | <input type="checkbox"/> Work experience letter (if any)         |
| <input type="checkbox"/> High School Transcripts (10+2)  | <input type="checkbox"/> Photocopy of valid passport/citizenship |
| <input type="checkbox"/> Provisional, Migration          |  |

### Medical History

Do you have any physical/neurological or mental condition that we should be aware of ?

If yes, please specify \_\_\_\_\_

Do you take medicine on regular basis ? Yes \_\_\_\_\_ (specify)

Medical Condition (Please Tick)

- |                                   |  |  |                                      |
|-----------------------------------|--|--|--------------------------------------|
| <input type="checkbox"/> Eyesight | <input type="checkbox"/> Allergies _____ (specify) |  |                                      |
| <input type="checkbox"/> Hearing  | <input type="checkbox"/> Epilepsy                  | <input type="checkbox"/> Physical Disorder | <input type="checkbox"/> Blood Group |

Do you have any learning difficulties ?

If yes, please specify \_\_\_\_\_

The following medical tests are required:

- \* Chest, X-ray, TB test, HIV test, Hepatitis B, Jaundice, Complete Blood Count, Routine Urinalysis
- \* Please bring all the reports along with a report from the doctor stating that you are fit to work within 15 days of being admitted.

## School of Hotel Management

### Enrollment Agreement

#### Transcripts & Credit Transfer:

It is your responsibility to ensure that all high school and post secondary transcripts are submitted to Silver Mountain School of Hotel Management. If these records are not immediately available, a "provisional" acceptance letter may be issued authorizing you to begin a degree program or other program of study as an enrolled student for a limited period of time during which official documents

required for matriculation are obtained. The SMSH does not guarantee that academic credits from other institutions will be accepted at Silver Mountain School of Hotel Management.

#### Refund Policy:

Silver Mountain reserves the rights of refund policy and once the fee is paid it is not refundable.

#### For Office Use Only

Accept ☐

Reject ☐

Admission No.: \_\_\_\_\_

Comment by Inter viewer: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Referred by:

Payment Schedule:

Note:

The student has to clear his/her semester fee before the start of each semester.

Signature \_\_\_\_\_

Signature \_\_\_\_\_

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

Approved by  
Admission Director

*"Managed by Swiss Hotel Graduates"*

I have attached 2 passport size white background colored photographs, a detailed curriculum vitae, photocopies of citizenship card and all certificates, diplomas and references received from the above schools, employees, and institutions, and compulsory health certificate. I will make payments accordingly to SMSH policy.

I have taken note of contents of the registrations information and accept them.

Place and date:

.....  
Signature of Parent or Guardian

.....  
Signature of applicant