



# BISHRAMPUR RURAL MUNICIPALITY

## TRAINING PROGRAM

### Student Registration Form

2x2

Photo

Name : \_\_\_\_\_

Address : \_\_\_\_\_

Phone Number : \_\_\_\_\_

Email Address : \_\_\_\_\_

Gender : ☐ Male ☐ Female ☐ Other

Class : ☐ SEE ☐ Class 12

**Student Signature**

Date:.....

bishrampurgapa@gmail.com

9865416981