

# **Application Form**

All applicants interested in AYLEP are required to complete this application in full. Item marked with an asterisk\* is compulsory. The application may take around 10 minutes. Please feel free to contact our Admissions Officer at <a href="mailto:admissions@aylep.com">admissions@aylep.com</a> should you need any assistance.



## **A. Personal Information**

Full Name (CAPITAL LETTER, as per Passport)*	
Family Name (Surname) *	
Date of Birth * (DD/MM/YYYY) / /	Gender*
Nationality*	

### **B. Contact Information**

E-mail Address *
Alternative E-mail Address*
Mobile Number*
Country Code – Phone Number

#### **C. Health Conditions**

Allergies*
Major Health Problems*
Medication Currently Taken*
Dietary Requirements (NA/Halal/Vegetarian) *



## **D. Education Information**

University/College	/School Name*						
Grade Level *		☐ Graduate	(PhD/Master)				
Please select (x) to indicat	te	☐ Undergra	duate (Bachelo	r/Diploma)			
		High Scho	ool				
		☐ Teacher/	Faculty Member	·/Staff			
Major/Faculty*							
Year of Study/Posit	tion *						
Indicate position for Teac Member/Staff ONLY	her/Faculty						
Please select (X) to	indicate your l	English proficie	ncy with 1 being	g lowest and 5 b	eing highest.		
	1	2	3	4	5		
English*							
Native Language (Please Specify) *							
E. Parent/Guar	dian/Next-d	of-Kin Inforn	nation				
Full Name*			Relationship with Applicant*				
Occupation*			Mobile Nu Country Code – Number				
E-mail Address*							



## F. Achievements/Experiences

Awards/Scholarships
Co-Curricular Activities (Clubs, Societies, Sports, Performing Arts or Competitions, etc.)
Walanta an Mutama shin / Jala Ermanian as
Volunteer/Internship/Job Experience



## **G. General Questions**

Please answer the following questions in no more than 200 words each.

Why do you want to take part in the Asian Youth Leaders Elite Program? How does it fit into your personal goals now, and your future career/life goals? *
What characteristics do you possess that make you qualified to be in our program? *
Tell us a difficult challenge you faced and how did you overcome it? *



## **H. Scholarship Application Question**

Please select (X) i below) *	if you would like to apply for scholarship? (If yes, please answer the question
Yes	
No	
	er additional information that you would like to share with us? Are there any possess that were not addressed in this application that you feel are important
(Please answer the f	following question in no more than 500 words)



#### I. Choices

Please rank	k your c	choices f	rom tl	he fol	lowing	list of	f countries:
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Nepal, U	nited A	Arab	Emirates,	Sri	Lanka
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1st Country*	
2 <sup>nd</sup> Country*	
3 <sup>rd</sup> Country*	

#### **Declaration**

I hereby declare that the particulars provided are true to the best of my knowledge and that I have not willfully suppressed any material facts.

Please pay the application fee after your submission. As all communication regarding your application will be via email only, kindly check your email regularly.

	(Please insert your digital signature here)				
Signature:		Date (DD/MM/YYYY) _	/	/	

Please send this application form to <a href="mailto:admissions@aylep.com">admissions@aylep.com</a> after completing it.