ARMY INSTITUTE OF BUSINESS ADMINISTRATION (AIBA) SAVAR Savar Cantonment, Dhaka-1344

ADMISSION FORM FOR MBA REGULAR PROGRAMME

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1. 11	ndex No: 2. Clas	S ID No:	5. Date of	Admission:					
4. I	Registration No :		5. Session:						
6.	List of deposited Certificates	& Other Papers							
	a. SSC Certificate/Equivalent:	Main Copy	+ Photo copy						
	b. SSC Mark sheet:	Main Copy	+ Photo copy						
	c. HSC Certificate/Equivalent:	Main Copy	+ Photo copy						
	d. HSC Mark sheet:	Main Copy	+ Photo copy						
	e. HSC Testimonial:	Main Copy	+ Photo copy						
	f. BBA/Honors Certificate/Equiva	lent: Main Copy	+ Photo copy						
	g. BBA/Honors Mark sheet:	Main Copy	+ Photo copy						
	h. National ID/Nationality Certific	cate: Main Copy	+ Photo copy						
	i. Birth Certificate:	Main Copy	+ Photo copy						
	j. Any Other:	Main Copy	+ Photo copy						
Admission Officer's Signature (To be filled up by Applicant) Note: Incomplete application will not be considered for admission. AIBA Savar authority reserves all rights to cancel candidature of any candidate without showing any reason.									
1. Applicant's Name (In English, Capital):									
2. Father's Name: Profession: Tel No:									
3.	Mother's Name	Profess	sion:	Tel No:					
4.									
5. Date of Birth (according to SSC certificate): Day: Month:									
6	6. Gender: Male/ Female 7. B	lood Group:	8. Marita	l Status: Single/ Married					
9	. Siblings: Brother:	Sister:							

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-		ther/Mother/Guardian:				•••••		
14. Education	_	ion:						
Name of Exam	Passing Year	Name of	Institution	Roll No	Board	GPA		
15. Hobbies/E	Extra-curricul	ar Activities:						
16. Any Other	Activities/A	chievements:						
		e with relation, Address a						
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•		regulations of the Institute decision of the Institute is	•	•	•			
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Date:			_					
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Comments o	f Section Off	icer (Account)						
1. Amount P	aid: Taka	2. Proced	ure: Cash/Pay order/	Online transfer/				
3. Remarks:								
			Signature o Date:	of Section Officer (Ac	count)			
Comments of	Deputy Dire	ctor (Academy)						
	- -	<u>-</u> '	Signature o	of Deputy Director (A	cademy)			
			Date:	1)	J /			