ARMY INSTITUTE OF BUSINESS ADMINISTRATION (AIBA) SAVAR

Savar Cantonment, Dhaka-1344 ADMISSION FORM FOR BBA PROGRAMME

(For Official Use Only)

8 copies recent passport size attested color photographs

1. Index No:	2. Class ID No:	3. Date of	3. Date of Admission:		
4. Registration No :		5. Session:			
6. Waiver related information a. GPA 5 in HSC b. Generation	,	er c. Children of Arme	d Forces Personnel (Serving /Retired).		
d. Sibling e. Student pass	ed from College run by A	rmy Authority.			
<u>List of deposited Certificates & Other Papers</u>					
a. SSC Certificate/Equiva	alent: Main Cop	y + Photo copy			
b. SSC Mark sheet:	Main Cop	y + Photo copy			
c. HSC Certificate/Equiva	alent: Main Cop	y + Photo copy			
d. HSC Mark sheet:	Main Cop	y + Photo copy			
e. HSC Testimonial:	Main Cop	y + Photo copy			
f. National ID/Nationality	y Certificate: Main Cop	y + Photo copy			
g. Birth Certificate:	Main Cop	y + Photo copy			
h. Waiver related Certific	cate: Main Cop	y + Photo copy			
j. Any Other:	Main Cop	y + Photo copy			
8. Payable Amount during A	dmission: Taka				
			Admission Officer's Signature		
	(To be filled u	p by Applicant)			
• • •	•	or admission. AIBA S	avar authority reserves all rights to		
**					
2. Father's Name:	Professi	on:	Mob No:		
3. Mother's Name	Profe	ssion:	Mob No:		
4. Permanent Address:					
			Year		

6. Gender: M	lale/ Female	7. Blood Group:	8. Marital Status: Single/ Married			
9. Siblings:	Brother:	Sister:				
10. Name and	d ID sibling	who is studying in AIBA Savar	:			
11. Religion:.		12. Nat	ionality:			
13. Monthly I	ncome of Fa	ther/Mother/Guardian:				
14. Education	nal Qualifica	tion:				
Name of Passing Exam Year		Name of Institution		Roll No	Board	GPA
15. Hobbies/E	xtra-curricul	ar Activities:		1		
16. Any Other	· Activities/A	chievements:				
·		e with relation, Address and Ce				
•••••		No:				
18. Applicant	s Cell Phone	UNDERTAL				
abide by all th	ne rules and r	all the information furnished in regulations of the Institution and decision of the Institute regard	d ensure to pay all	fees & charges d	uly. We also	ee to
Student's Sign	nature:	Guard	dian's name:			
Date:		Signa	ture:			
		Date:				•••••
Comments of	f Section Off	icer (Account)				
1. Amount Pa	aid: Taka	2. Procedure: C	ash/Pay order/Onli	ne transfer/		
3. Remarks:						
			Signature of Secondate:	ction Officer (Ac	count)	
Comments of	Deputy Dire	ctor (Academy)				
		. ——	Signature of De	puty Director (A	cademy)	

Date: