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 Admission:	3. Date of Admission:			
4. Registration No :		5. Session:				
6. Waiver related information (Pa. GPA 5 in HSC b. General	· ·	er c. Children of Armed Forces Personnel (Serving /R	Retired).			
d. Sibling e. Student passed	from College run by Ar	rmy Authority.				
List of deposited Certificates & Other Papers						
a. SSC Certificate/Equivalen	t: Main Copy	y + Photo copy				
b. SSC Mark sheet:	Main Copy	y + Photo copy				
c. HSC Certificate/Equivaler	nt: Main Copy	y + Photo copy				
d. HSC Mark sheet:	Main Copy	y + Photo copy				
e. HSC Testimonial:	Main Copy	y + Photo copy				
f. National ID/Nationality Co	ertificate: Main Copy	y + Photo copy				
g. Birth Certificate:	Main Copy	y + Photo copy				
h. Waiver related Certificate	: Main Copy	y + Photo copy				
j. Any Other:	Main Copy	y + Photo copy				
8. Payable Amount during Adm	ission: Taka	Admission Officer's Signat	ture			
cancel candidature of an 1. Applicant's Name (In Engl	y candidate without sho	or admission. AIBA Savar authority reserves all right				
2. Father's Name:	Professio	on: Mob No:				
3. Mother's Name	Profess	ssion: Mob No:				
4. Permanent Address:			*****			

6. Gender: Male/ Female		7. Blood Group: 8. Marital Status: Single/ Married			Married (
9. Siblings:	Brother:	Sister:				
10. Name and	d ID sibling v	vho is studying in AIBA Savar	:			
11. Religion:.		12. Nat	ionality:			
13. Monthly I	ncome of Fat	her/Mother/Guardian:				
14. Education	nal Qualificat	ion:				
Name of Passing Exam Year		Name of Institution		Roll No	Board	GPA
15. Hobbies/E	xtra-curricula	nr Activities:				- <u>II</u>
		chievements:			_	
·		e with relation, Address and Ce				
18. Applicant's	s Cell Phone	No: <u>U</u> NDERTAI				
abide by all th	ne rules and re	all the information furnished in egulations 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	lian's name:			
Date:		Signa	ture:			
		_				
Comments of	f Section Offi	cer (Account)				
1. Amount Pa	aid: Taka	2. Procedure: C	ash/Pay order/Onli	ne transfer/		
3. Remarks:						
			Signature of Sec Date:	etion Officer (Ac	count)	
Comments of	Deputy Direc	tor (Academy)				
			Signature of De	outy Director (A	cademy)	

Date: