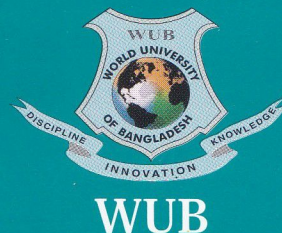


# WORLD UNIVERSITY

O F B A N G L A D E S H

Member, Association of Commonwealth Universities



WUB

## APPLICATION FOR ADMISSION

[www.wub.edu.bd](http://www.wub.edu.bd)



# Application for Admission

**For office use only**

- ☐ Documentary evidence of qualifications checked.  
☐ This application is forwarded unconditionally/conditionally

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please Attach  
two (2) copies of  
PP Size Photographs

**Personal Detail :**

Use Capital Letter

Full Name

Date of Birth

D D M M Y Y Y Y

National ID No.

Nationality \_\_\_\_\_ Blood Group \_\_\_\_\_

Sex : ☐ Male ☐ Female Marital Status : ☐ Married ☐ Unmarried

**Contact Detail :****Present Address / Local Address**

House No. / Name \_\_\_\_\_ Road No \_\_\_\_\_ Colony / Area \_\_\_\_\_

Village \_\_\_\_\_ Post Office / Code \_\_\_\_\_ Police Station \_\_\_\_\_ District \_\_\_\_\_

Country ☐ Bangladesh \_\_\_\_\_ E-mail \_\_\_\_\_ Mobile \_\_\_\_\_

**Permanent Address (if different from above)**

House No. / Name \_\_\_\_\_ Road No \_\_\_\_\_ Colony / Area \_\_\_\_\_

Village \_\_\_\_\_ Post Office / Code \_\_\_\_\_ Police Station \_\_\_\_\_ District \_\_\_\_\_

Country ☐ Bangladesh \_\_\_\_\_ E-mail \_\_\_\_\_ Mobile \_\_\_\_\_

**Emergency Contact Detail :**

Contact Name \_\_\_\_\_ Relationship \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_ Mobile \_\_\_\_\_

**Proposed program of study at World University of Bangladesh (WUB)**

Date of Commencement of Program \_\_\_\_\_

**How did you first come to know about WUB?**

- ☐ **Newspaper** Please specify : \_\_\_\_\_ ☐ Friend / Relative ☐ Website ☐ WUB - Student / Teacher  
☐ Banner ☐ Others :



**Educational Qualifications :**

Name of Examination	SSC / O'Level / Dakhil or its equivalent	HSC / A' Level / Alim / GED or its equivalent	Graduate	Other
Passing Year				
Exam Roll				
Group				
Institution				
Board / University				
GPA / Division / Class / CGPA				
Total Marks				
Major Subjects				
Merit Position				

Results of any other tests taken with dates (e.g. IELTS, TOEFL, SAT I, GMAT etc.)

*Please submit certificates or any other documentary evidence*

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**Employment Information** (if any) *print the recent one*

Present Employer \_\_\_\_\_ Designation \_\_\_\_\_

Address of Organization \_\_\_\_\_

Tel No. \_\_\_\_\_

Date of joining 

D	D	M	M	Y	Y	Y	Y

Type of Employment : ☐ Full-Time ☐ Part-Time

Type of Organization : ☐ Private ☐ Public ☐ Other

Total years of work experience \_\_\_\_\_

### Parent's Information :

[illegible][illegible]

**Business / Service Address**

Job Title \_\_\_\_\_ Type of Organization : ☐ Private ☐ Public ☐ Other

Organization Address \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_ Mobile \_\_\_\_\_

**Local / Legal Guardian:**

Name \_\_\_\_\_

Occupation \_\_\_\_\_ Relationship with Student \_\_\_\_\_

### Present Address

House No. / Name \_\_\_\_\_ City / Town / Village \_\_\_\_\_ Post Office / Code \_\_\_\_\_ Police Station \_\_\_\_\_

District \_\_\_\_\_ Telephone \_\_\_\_\_ E-mail \_\_\_\_\_ Mobile \_\_\_\_\_

## Permanent Address (if different from above)

House No. / Name \_\_\_\_\_ City / Town / Village \_\_\_\_\_ Post Office / Code \_\_\_\_\_ Police Station \_\_\_\_\_

District \_\_\_\_\_ Telephone \_\_\_\_\_ E-mail \_\_\_\_\_ Mobile \_\_\_\_\_

### Statement

I agree to take the responsibility to finance the educational costs of the applicant during his / her period of study at WUB.

Name of the Sponsor \_\_\_\_\_ Relationship with Student \_\_\_\_\_

Address \_\_\_\_\_

Mobile

Signature

I agree to ensure that the applicant shall abide by all rules and regulations of the university and will be held liable for breach of discipline.

Name of Parent / Guardian \_\_\_\_\_

Signature

**Declaration by the Student:**

All the information contained in this application is correct and I declare that if admitted into World University of Bangladesh (WUB), I will be bound by the rules and regulations of the university. Student's code of conduct will be held liable for breach of any rules of the university.

I agree to pay all educational costs whenever these fall due, failing of which, I may be subjected to disciplinary actions/penalties.

Full Name of the Applicant

Signature of the Applicant