

German University Bangladesh

Telepara T&T Road, Chandana Chowrasta, 38 Gazipur Sadar
Gazipur -1702, Bangladesh.

Phone: +8802 929 4511, +8802 929 4778, Fax: +8802 887 0941

E-mail: admission@gub.edu.bd, Website: www.gub.edu.bd



Please affix a
passport size
photograph here

ADMISSION FORM

Applicant for admission in : _____

Receipt No. : _____

Semester: _____

Program : _____

Year : _____

1. Applicant's Name : _____

(as in SSC/OLevel/Equivalent)

National ID _____

Passport No _____

Date of Birth _____

Gender _____

Married

**2. Father's /
Husband's name** _____

Occupation _____

Designation _____

Work address _____

National ID _____

Contact No _____

Email _____

3. Mailing address _____

Apartment/House _____

Village/Area _____

Postal Code _____

Country _____

4. Permanent address _____

Apartment/House _____

Village/Area : _____

Post office : _____

Postal Code : _____

P.S/City : _____

Country : _____

Home/Cell phone : _____

5. Information of the Guardian who will bear the cost of your education

Name : _____

Occupation : _____

Designation : _____

Annual Income : _____

Contact No. : _____

Email : _____

Relationship : _____

Mailing Address : _____

6. Academic Information**S.S.C./ Secondary School**

| Institution | Board/University | Group | Passing Year | Division/GPA/CGPA |
|--------------------|-------------------------|--------------|---------------------|--------------------------|
| _____ | _____ | _____ | _____ | _____ |

H.S.C/ High School/GCE

| Institution | Board/University | Group | Passing Year | Division/GPA/CGPA |
|--------------------|-------------------------|--------------|---------------------|--------------------------|
| _____ | _____ | _____ | _____ | _____ |

College / University

| Institution | Board/University | Group | Passing Year | Division/GPA/CGPA |
|--------------------|-------------------------|--------------|---------------------|--------------------------|
| _____ | _____ | _____ | _____ | _____ |

7. Merit Scholarship, other honors and awards you have received.

8. Have you ever been dismissed, suspended or expelled from any institution of learning? **Yes** **No**

If yes, describe briefly or attach a statement.

9. Declaration

I hereby accept that, if I am admitted to German University Bangladesh, I shall abide by the rules and regulations of the University and the GUB Student Code of Conduct.

I understand that manufacture, distribution, possession and consumption of tobacco products, alcohol, drugs, and controlled (illegal) substances at GUB premises are strictly prohibited and that I may be expelled from the university for violating the prohibition or for abetting violations.

I am aware that, withholding information requested in this application or giving false information will make me ineligible for admission at GUB, and will render me liable for dismissal, if admitted. I hereby certify that the information and statements, provided above, are correct and complete to the best of my knowledge.

| | |
|-------------------------------|-------------------------------------|
| Signature of applicant | Signature of Parent/Guardian |
|-------------------------------|-------------------------------------|

| | | | | | |
|-------------------|-------------------|------|-----|-------|------|
| Full name (Print) | Full name (Print) | | | | |
| Day | Month | Year | Day | Month | Year |

Note: The application will not be processed unless signed.

For official use only

(Do not write anything bellow this space)

Registration No : _____

Applicant's Name
(as in SSC/ 'O' Level/Equivalent) : _____

Father's name/Husband's name : _____

Mother's name : _____

Cost bearing Guardian's name : _____

Waiver : Reason _____ Reference _____ Percentage _____

Has been selected for admission in the specified Department in the First Semester First year class in the Semester, Winter/Summer-2015.

Verified By

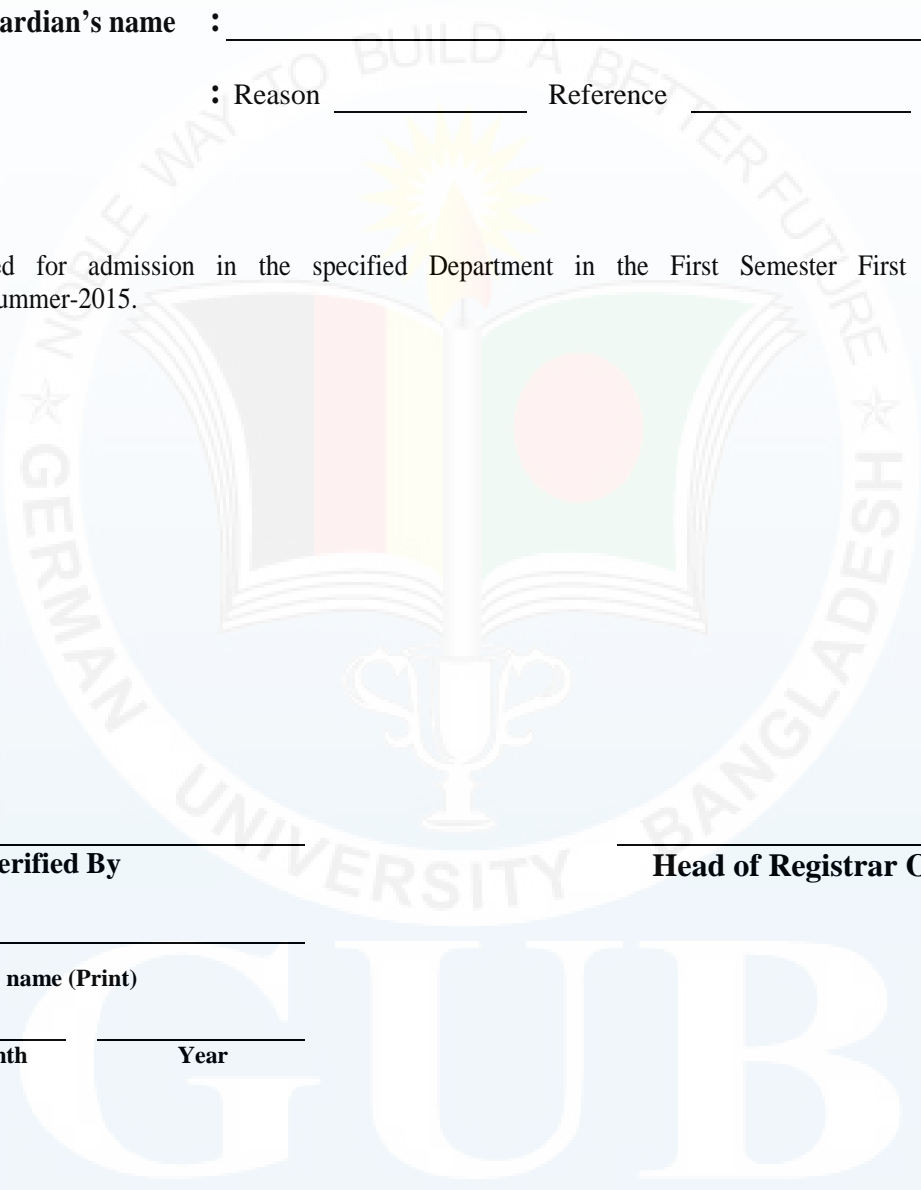
Head of Registrar Office and Seal

Full name (Print)

Day

Month

Year



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Please affix a passport
size photograph here

Student's Part For Official Use only

Receipt No: _____

Semester :

Program:

Year: _____

Registration Number : _____

Applicant's Name : _____
(as in SSC/ 'O' Level/Equivalent)

Father's name/Husband's name : _____

Mother's name : _____

Present Address : _____

Waiver : Reason _____ Reference _____ Percentage _____

Admission Officer

Head of Registrar Office and Seal

Full name (Print)

Day

Month

Year