



Ishakha International University, Bangladesh

Faculty of Business Studies Primary Application Form

For Admission in BBA Program

Year: 201__ Semester: Spring Summer Fall

Office Copy

Serial No.-

Roll No.-

Paid Amount:

Taka 100/=

Name of the Applicant: _____

Received by

Signature of the authority



Ishakha International University, Bangladesh

Faculty of Business Studies Primary Application Form

For Admission in BBA Program

Year: 201__ Semester: Spring Summer Fall

Passport size
Photographs

Serial No.

Roll No.

1. Name of the Applicant: _____

2. Father's Name: _____

3. Mother's Name: _____

4. Mailing Address: _____

Contact No. _____

5. Result of S.S.C/Equivalent and H.S.C/Equivalent Examination:

5.1 S.S.C/Equivalent: Group: _____ Board: _____ Roll No. _____ Year: _____ Division/GPA _____

5.2 H.S.C/Equivalent: Group: _____ Board: _____ Roll No. _____ Year: _____ Division/GPA _____

5.3 Subject based Grade in HSC/Equivalent Examination:

| Subject | Bangla | English | | | | 4th Subject | Total GPA |
|------------------------------|--------|---------|--|--|--|-------------|-----------|
| Obtained Letter Grade/Number | | | | | | | |

5.4 Obtained GPA/Marks in S.S.C/ Equivalent Examination

:

5.5 Obtained GPA/Marks in H.S.C/ Equivalent Examination

:

6. Total GPA obtained in S.S.C/Equivalent and H.S.C/Equivalent Examination:

I, do hereby, declare that the information provided in this application form is true and correct. I understand that my application for admission will be cancelled if any information is found untrue.

Date: _____

(Signature of the Applicant)

Instruction:

- a) The application form must be filled by the applicant.
- b) Photocopy of Transcript/ Mark Sheet must be attached.
- c) Photocopy of Registration Card of both S.S.C/Equivalent and H.S.C/Equivalent Examination must be attached.



Ishakha International University, Bangladesh

Faculty of Business Studies For Admission in BBA Program

Admit Card

Serial No.

Year: 201__ Semester: Spring Summer Fall

Roll No.

Passport size
Photographs

Name of the Applicant: _____

Signature of the Applicant: _____

Admission Test: _____

Time: _____

Date: _____

(Signature of the Authority)