



Varendra Institute of Biosciences

(Aff. University of Rajshahi)

Ekdala, Natore-6400

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ADMISSION FORM

(Session: 2024-25)

Read Carefully Before You Start Writing

1. Basic Information:

- Name of Student:
- Name (in Bangla):
- Subject/ Department:

Affix your recent
photograph
3.5cm×4.5cm
Write your name and date
on the other side of the
photo

2. Personal Information:

- Date of Birth (dd – mm - yyyy):
- Place of Birth (District & Country):
- Birth Registration Number:
- Blood Group: ☐A ☐B ☐AB ☐O ☐Positive ☐Negative
- Phone/Cell No: • E-mail:
- National ID No. (if any):
- Mother's Name (in Bangla and English):
- Father's Name (in Bangla and English):
- Guardian's Name & Relationship (in absence of parents):
- Nationality:
- Gender : ☐ Male ☐ Female

3. Permanent Address:

- House, Road, Village / Locality:
- Post Office:
- District:
- Post/ZIP code:
- Country:
- PS/Upazila:

4. Present Address:

- House, Road, Village:
- Post Office:
- PS/Upazila:
- Post code:
- District:

5. Emergency Contact:

- Name & Address:
- Relationship: • Phone/Cell No:

DECLARATION

*I hereby declare that the above information is true. I shall abide by the rules and regulations set by the Institute.
I shall accept any decision by the Institute if I am accused of any violation of the Institute's rules and regulations.*

Signature of Father/Mother/Guardian

Signature of Candidate

-----**This part is for office use only**-----

Approved for Admission

Approved

Approved

Chairman/Director's Signature & official Seal

Principal's Signature & Official Seal

Department Head Signature and Seal