

# **University of Rajshahi Affiliate Registration Form**

**Session**: 2024-2025

Exam Roll:	Exam Score:	Merit Position:

Student ID/Registration No.

## 1. Basic information:

Name of Student:
Program:
Name of Faculty:
Subject/Department:
College/Institution:
Quota:

## 2. Personal information:

Date of Birth:Place of BirthBlood Group:GenderMobile No.:e-Mail addressNational ID:Passport No.Birth Regi No.:Religion:Nationality:Height (inch)

Father's Name: Mother's Name: Gurdian Name: & Relationship

### 3. Permanent Address:

House/Road/Vill:

PS/Upazila : District :

Post Office :

### 4. Present Address:

House/Road/Vill:

PS/Upazila : District :

Post Office :

5 Previous	Academi	c Information:			
Exam	Roll	Registration No.	Group	Passing Year	GPA/Div
SSC/Eqv.		0	•	8	
HSC/Eqv.					
SSC Board/Eqv.:		HSC Board/Eqv.:			
SSC High So	chool/Institut	ion:	1		
HSC College	e name/Instit	ution:			
Others Study	Group	:			
Others Colle	ge/Institutio	1:			
DBBL TRX			Amount:		
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5. Emergency Contact:

Name & Address: