University of Rajshahi
Registration Form

Exam Roll **:** Exam Score **:** Merit Position**:**

Student ID/Registration No.: Session : 2024-2025

1. Basic information**:**

Name of Student**:**

Designation **:** Assistant Superintendent of Police(ASP), Program**:** Master of Police Science(MPS)

Name of Faculty **:**

Subject/Department**:**

College/Institution**:**

Quota **:**

2. Personal information**:**

Date of Birth **:**	Place of Birth**:**
Blood Group **:**	Gender **:**
Phone/Cell No**:**	Marital Status **:**
National ID **:**	e-Mail Address**:**
Birth Regi No**:**	Religion **:**
Passport No. **:**	Height(in inch)**:**
Nationality **:**	

Father's Name :

Mother's Name:

Guardian Name:

3. Permanent Address**:**

House/Road/Vill **:**

PS/Upazila **:** District :

Post Office&Code**:**

4. Present Address**:**

House/Road/Vill **:**

PS/Upazila **:** District:

Post Office&Code**:**

5. Emergency Contact**:**

Name & Address**:**

Relationship **:**   Phone/Cell No.**:**

6. Previous Academic Information**:**

Exam	Roll	Registration No.	Group	Passing Year	CGPA/Div
SSC/Eqv.					
HSC/Eqv.					
SSC Board/Eqv.**:**			HSC Board/Eqv.**:**		
SSC Institution **:**					
HSC Institution **:**					

7. Graduate Information:

Honors/pass Subject **:**		
Masters Subject **:**		
Honors/pass CGPA **:**	Masters GPA **:**	
Hons/pass Passing yr**:**	Masters Passing year **:**	
Honors/pass Institute**:**		
Masters Institute **:**		

DBBL TRX ID **:**   **Amount :**

DECLARATION

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

Signature of Candidate & Date

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Prepared by : ....

(Affiliated College)

_____   _____
Principal/Registrar, Affiliated College   Registrar, RU.
(Signature and Seal)   (Signature and Seal)