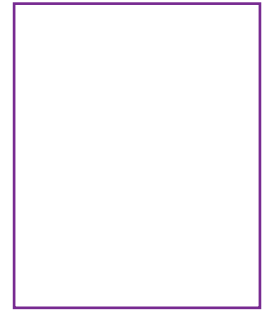




NORTHERN UNIVERSITY

B A N G L A D E S H

Application Form for International Students



Personal Details:

Family Name (your legal surname): Date of Birth:
Day Month Year

First Name (your legal first name): Second Name (s):

Previous Name (s): This was my Family Name First Name

Gender: Male Female Country of Citizenship:

You must attach a verified copy of your birth certificate or passport and evidence of any change of name

Contact Postal Address:

Number and Street: Telephone:

Suburb: Fax:

City: Post Code: Cell Phone:

Country: Email:

You will be issued with a university email account once your enrolment is completed.

English Language Proficiency

(Please tick all options that apply to you).

English is my first language English was the medium of instruction of my previous study (years). Documentary evidence required.

I have taken an English proficiency test (IELTS or TOEFL or equivalent)

Test date: English test name:

Overall result (if known): Writing band (if known):

An ORIGINAL copy of results is required - refer to checklist

I will take an English proficiency test on (date) I am currently in level of English language study at (Institution / School)

I have attached a letter from my English language teacher or academic professor

Secondary School Record

(Country Highest Secondary School qualification)

Name of School: Date Completed: month (year)

Name of Examination:

A verified copy of the results is required

TERTIARY/HIGHER EDUCATION STUDY RECORD

Is this application for your first year at a tertiary / higher education institution? Yes No

Complete this section if you are enrolling or have previously enrolled at another university in your country or overseas.

Name of the University/Institution <input type="checkbox"/>	Qualification/Examination <input type="checkbox"/>	From <input type="checkbox"/>	To <input type="checkbox"/>	Remarks

Verified copy of academic records attached.

Do you want to apply for credit of papers completed at NUB ? Yes No

PROPOSED STUDY AT NORTHERN UNIVERSITY BANGLADESH

Proposed start date. Year Spring Semester, January Summer Semester, May

Fall Semester, September

CHOICE OF QUALIFICATION

First choice of qualification i.e. a degree, diploma or certificate.

Qualification:

School of Studies or Faculty: Major subjects:	
<input type="checkbox"/> 1	
<input type="checkbox"/> 2	
or Specified Program:	

In case you are unsuccessful in your first choice of qualification, please give an alternative choice.

Qualification:

School of Studies or Faculty: Major subjects:	
<input type="checkbox"/> 1	
<input type="checkbox"/> 2	
or Specified Program:	

DECLARATION

I declare that the information I have provided in this application and in any attached documentation is true and correct and that I have personally completed the form and I am the sole author of the student statement and resume. I have not withheld any information which could have a bearing on my enrolment or the conditions of my enrolment.

I understand that all documents submitted with this application become the property of the Northern University Bangladesh (NUB) and will not be returned to applicants. I agree to supply any further documentation requested by NUB for the purpose of my enrolment. If my application is accepted for admission to the program applied for, I under take to abide by all the rules and regulations of this University and ensure to pay all fees and charges as decided by the authority.

Signature of the Student: Date :.....

OFFICIAL USE ONLY

Admission Office: Complete Incomplete Recommended Not Recommended

Remarks (if any):

.....
Authorized Signature

.....
Signature, Head of the Dept

FINAL APPROVAL: Accepted Not Accepted

.....
Date:

.....
Signature of the Registrar