## Scholarship Application Form

জাহাঙ্গীরনগর বিশ্ববিদ্যালয় পরিসংখ্যান বিভাগ অ্যালামনাই অ্যাসোসিয়েশন Jahangirnagar University Department of Statistics Alumni Association

Photo

1.	Applicant's Name	:				
2.	Father's Name	:				
3.	Mother's Name	:				
4.	Batch No.	:	5.	Session	:	
6.	Date of Birth	:	7.	Class Roll	:	
8.	Gender	:	9.	Nationality	:	

10. Academic Information

:

	Exam Name	Year	Institution N	lame	Board/University		Group/Subject	CGPA
	SSC							
	HSC							
	Hon's 1⁵ Year							
	Hon's 2 <sup>nd</sup> Year							
	Hon's 3 <sup>rd</sup> Year							
	Hon's 4 <sup>th</sup> Year							
11.	Present : Address							
12.	Permanent Address	Vill/	Road	:		P.O.	:	
		Than	a/Upzilla	:		Distri	ct :	
13.	Contact details	:	Mobile :		Email :			
14.	Extracurricular activities (if any	) :						

15.	Disability (if any	) : vision Impairment acquired brain injury	
		deaf or hard of hearing autism spectrum disorder	
		mental health conditions physical disability	
		intellectual disability others	
16.	Family : Income	Total family members : Gross family income :	
		Number of earnings : Number of other siblings in study :	
17.	Declaration :	<ul> <li>(a) I am not receiving sufficient financial assistance from an organization.</li> <li>(b) I shall meticulously follow the policy of JUDSAA.</li> <li>(c) I hereby declare that information furnished above is true and respect and in case any information is found incorrect ever candidature shall be liable to be rejected.</li> </ul>	correct in every
		Applicant's Sigr	nature with date
18.	Recommendatior the Department	: Signature v	with date & seal visor/Chairman)
19.	Recommendatior the Scholarship Committee	n of Remarks:	
		Signature Signature Signature Signature Signature	re Signature
20.	Approved by JUDSAA	: General Secretary	President