



আমরা
পরোপকারী
পরিবার

Undergraduate Scholarship Program (UGS)-2026

Organized by- APP

Application Form

Picture

Official Code:

Institute:

District:

01. Name of the Applicant (English):.....

Bengali :

02. Father's Name (English) :

Bengali :

03. Mother's Name (English) :

Bengali :

04. Date of Birth :

05. Nationality :

06. National ID No :

07. Present Address :

08. Permanent Address :

09. Number of family member's : Male Female

10. Mobile No. : WhatsApp No.....

11. E-mail address :

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NGO BUREAU REG NO.- 3070, DSS: DHK-07993

Address: Flat-3 A, 3rd floor; 22, Rabindra Sharani, Sector:7, Uttara, Dhaka-1230
Mobile:+8801778255457, Email: apptrust21@gmail.com Website: apptrustbd.org



12. Name of the Institution :

13. Faculty :

14. Department :

15. Year and Semester :

16. Date of Admission :

17. Probable Date of Completion of Graduation:

18. Academic Qualifications

Name of Exam	Major/Subject	Board/University	Year of passing	GPA
SSC or Equivalent				
HSC or Equivalent				

19. Language Skill

LANGUAGE	Reading	Writing	Listening	Spoken
English				
Arabic				
Other				

(Please write: Excellent, Very good, Good, and Poor)

20. Outstanding Activities

•Cultural Arena

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.....

•Sports Outdoor/Indoor

.....
.....



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• Social Work & Achievement

• Hobby and Others

21. Cause of applying for the Scholarship Present Financial Situation.

Please mention your family condition, your father's/ mother's occupation and yearly income, number of your brothers and sisters with their academic or professional identity. Please write in elaborately to assess the situation.

আপনাকে কেন শিক্ষাবৃত্তির জন্য নির্বাচিত করা হবে? (বাংলায় লিখুন)

Signature of applicant

Date:

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22. Recommendation (Moral and Ethical Guide)

Recommendation from the Head of the institution/ Head of the Department/ Any teacher of concern department/institution or any designated verifiable person and taking responsibility as the academic guardian of the student (Applicant)

It is to certify that.....

S/o,.....

Department.....

Year/Semester.....

Roll No.....

Is personally known to me. He is a regular student. I am taking responsibility as his moral and ethical guide and I shall send his monthly report to APP in the recommended sheet.

Signature with seal (Official Seal):.....

Name :

Designation :

Name of the Institution :

Contact : Email: