

# University of Dhaka Department of Disaster Science and Climate Resilience (DSCR)

#### Professional Masters in Disaster and Climate Resilience (PMDCR) Batch-05

**PHOTOGRAPH** 

#### ADMISSION FORM

## Admission Session 2 0 2 5 - 2 6

Application No. (For Office Use)  Roll No. (For Office Use)	Summer Semester (July -December)												Affix your latest passport size photograph (4 cm x 5 cm) duly attested by you							
[All columns to be filled by the candidate] [Incomplete forms will not be accepted]														Signature of the Candidate						
Personal Info																				
01. Name of the Candidate (in full)																				
02. Father's Name																				
03. Mother's Name																				
04. Present Address:																				
05. Permanent Address																				
06. Date of Birth: Date		Month			Year						<b>07.</b> ]	Bloo	d G	roup	,					
08. Nationality: Bangladeshi Other 09. Gender: Male											e	Female Others								
10. Marital Status: Sing	le M	arried	W	idow	/ed/I	Divo	rced		] 1	1. R	eligio	on:								
12. Phone Number																				
13. Email																				

Details (if applicable)

No

14. Whether a person with disability? Yes

## **Educational Qualification** Board/ Class/CGPA Examination Year Remarks Subject University Professional Info 16. Total Year of Experience: 17. Present Designation/ Occupation 18. Name of the Present Organization (if applicable) 19. Relevant Experience: Payment Info 20. Application Fee Payment Details: BDT 2000/- (Two Thousand taka only) **DECLARATION BY THE APPLICANT** I hereby declare that I have read and understood the conditions of eligibility for the programme for which I seek admission. I fulfil the minimum eligibility criteria and I have provided necessary information in this regard. In the event of any information being found incorrect or misleading, my candidature shall be liable to cancellation by the University/DSCR at any time and I shall not be entitled to refund of any fee paid by me to the University or the department. Date: Signature of the Candidate To be filled by the Office Date Submitted: **Total Score** Selected **Waiting List** Not Selected Appeared

Academic Info

Date: