



Application Form for admission into
MD/MS Phase-A, Residency Program for March-2019

Instructions for Applicants :

1. Foreign students can apply for the courses available in BSMMU.
2. Students already in any course can not apply, but they are eligible to apply one year after passing or withdrawal from the course (copy of withdrawal letter is to be enclosed with the application).

To be filled in by the candidate (in capital letters):

Course & Discipline :
Faculty :
Session :
Name of Institution : Bangabandhu Sheikh Mujib Medical University

To be scrutinized by the Chairman of the department for eligibility of a candidate

(Please attach a recent photograph of yourself)	Requisite papers :	Signature & Seal of Departmental Chairman
	<ul style="list-style-type: none"> • Certificate of MBBS/BDS or equivalent degree (recognized by respective Medical Council) : Yes / No • Two years after passing MBBS/BDS or equivalent degree with completion of one year internship. : Yes/ No • Permanent Registration Certificate from the Medical and or & Dental Council of respective countries. (Recognized by BMDC) : Yes/ No • IELTS score of minimum 5.0 in each component, on average 5.5 : Yes/ No • Applied through respective High Commission/ Embassy in Bangladesh. : Yes/ No • Maximum age 45-year as on 28 February 2019 : Yes/ No • Attested photocopy of all documents. : Yes/ No • One year after passing or withdrawal from the course (if any) : Yes/ No • Remarks: Eligible / Not Eligible (Tick as applicable) 	

Decision of Departmental Selection Board after interview of a candidate.				<u>Recommendation</u> _____ Dean Respective Faculty
<input type="checkbox"/> Selected			<input type="checkbox"/> Not Selected	
(Tick appropriate box selected or not selected and cross the other box)				
_____ Member-Secretary	_____ Member	_____ Member	_____ Chairman Dept. of	
(Signature of the Members with official seal)				

(All information are to be filled in capital letters)

01. Full name of the candidate :
02. Mother's Name :
03. Father's Name :
04. Spouse Name :
05. Date of Birth :
06. Nationality :
07. Passport No. (Place of Issue, Date of Issue & Date of expiry) :
08. Religion :

- 09. Marital Status :
- 10. Address for Correspondence with E-mail address :
- 11. Permanent Home Address (if different) :
- 12. Academic Record :
- 13. Training & Experiences :
- 14. Permission / Clearance by the respective Mission / Embassy :
- 15. Mention IELTS score (with certificate) :
- 16. Studied any Postgraduate course before? :
- 17. Date of Completion of last course (if any) :

References : Please mention name and address with contact numbers of two referees who are capable of informing about your academic and professional competence.

1.
.....
.....
E-mail:.....
Phone no.:

2.
.....
.....
E-mail:

Declaration :

I..... declare that all the information answered and provided in this application form by me is true and accurate to the best of my knowledge.
My application may be cancelled if any information mentioned above is found to be false or incomplete.

.....
Student's signature & Date



Enclosures:

- * Money receipt for application fee of US \$ 200 (two hundred, non refundable) or equivalent BDT of US \$ 200 is to be enclosed.
- * Two copies of recent passport size photograph.
- * Passport photocopy;
- * No objection certificate (from their won Foreign Ministry)
- * Other documents as mentioned under eligibility.
- * Photocopies without attestation are not acceptable.
- * This form and attachments should be returned to the **Controller of Examinations Block-B, Room No. 105 (1st floor) Bangabandhu Sheikh Mujib Medical University, Shahbag, Dhaka-1000, Bangladesh**