



THE INSTITUTION OF ENGINEERS, BANGLADESH
HEADQUARTERS : RAMNA, DHAKA-1000

Founded in 1948, Registered under Act XXI of 1860
 (Recognised by the Government of the People's Republic of Bangladesh as
 the Institution of Qualified Engineers)

Affix 2 recent
 Passport size
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APPLICATION FOR ATTACHMENT AS STUDENT
 (All relevant spaces must be filled in)

1.0 PERSONAL INFORMATION

1.1 NAME OF THE APPLICANT :
 (in block letters)

1.2 INFORMATION ABOUT GUARDIAN

1.2.1 FATHERS NAME :

1.2.2 RELATIONSHIP WITH GUARDIAN :

1.3 INFORMATION ABOUT DATE AND PLACE OF BIRTH

1.3.1 DATE OF BIRTH
 (Day, Month, Year)

1.3.2 AGE
 (on next birth date)

1.3.3 PLACE OF BIRTH :

1.4 MAILING ADDRESS :

1.5 PERMANENT ADDRESS :

1.6 SEX 1.6.1 MALE 1.6.2 FEMALE (Please tick as appropriate)

1.7 TELEPHONE (if any) :

2.0 EDUCATION (enclose attested photocopies of certificate)

2.1 EDUCATIONAL INFORMATION

Certificate (Mention Your Qualification)	Institute	Board/University	Year of Passing	Div/Class/ GPA/CGPA

2.2 MARKS OBTAINED IN SCIENCE SUBJECTS IN SSC AND HSC OR EQUIVALENT EXAMINATIONS

EXAMINATION	MARKS OBTAINED OUT OF HUNDRED / GPA OUT OF 5.00				REGISTRATION NO.
	ENGLISH	MATHEMATICS	PHYSICS	CHEMISTRY	
SSC					
HSC					

Enclose attested photocopies of Mark Sheets/Grade Sheets

3.0 PRESENT OCCUPATION (Please tick in appropriate box)

- | | |
|--|---|
| 3.1 STUDENT PERSUING <input type="checkbox"/> | 3.4 EMPLOYED IN AN ENGINEERING ORGANIZATION <input type="checkbox"/> |
| 3.2 STUDENT PERSUING UNDER GRADUATE DEGREE IN ENGINEERING <input type="checkbox"/> | 3.5 EMPLOYED IN A NON-ENGINEERING ORGANIZATION <input type="checkbox"/> |
| 3.3 STUDENT OTHER THAN ENGINEERING <input type="checkbox"/> | 3.6 OTHERS (Please specify): <input type="text"/> |

FOR OFFICIAL USE	
Scroll No.	
Date:	
Acknowledgement	
Completeness Check:	
Deficiency	
Action	
Honorary Secretary	
Scrutiny	
Education	
Marks	
Recommendation	
Others	
Action	
Recommended	Hon. Sec
H.Q.	Chairman
Fee	
Registration No.	HGS

4.0 NAME AND ADDRESS OF THE ORGANIZATION/INSTITUTE WHERE YOU ARE WORKING/STUDYING

(enclose attested photocopies of documents as proof)

Empty rectangular box for organization name and address.

5.0 Whether discharged from any institution/Organization on disciplinary ground

5.1 YES 5.2 NO (please tick as appropriate)

5.1.1 if yes State nature of action and reasons for discharge

Empty rectangular box for reasons for discharge.

6.0 Whether applied before for student attachment

6.1 YES 6.2 NO

6.1.1 if yes, mention year, centre and cause of rejection

Empty rectangular box for details of rejection.

7.0 DECLARATION

I declare that the information supplied in this form are complete and correct. If enrolled, I shall conform to the rules, regulations, bye-laws and code of ethics of the institution.

Empty box for date.

Date

Empty box for signature.

Signature of the applicant

8.0 RECOMMENDATION (recommended should be done by two corporate members (M or F) of IEB, in case of a student, this form is to be countersigned by the head of the institute)

8.1 From my personal knowledge about the applicant and in consideration of his qualification I recommend him in every way fit and proper to be attached to the Institution as a student. He/She

- 8.1.1 was a student of my institute
- 8.1.2 is an employee under my supervision
- 8.1.3 is known to me (please specify)

(Tick the appropriate box)

Name :
Designation :
Organization :
Membership Number :

Empty rectangular box for recommendation text.

Empty box for date.

Date

Empty box for signature.

Signature

8.2 From my personal knowledge about the applicant and in consideration of his qualification I recommend him in every way fit and proper to be attached to the Institution as a Student. He/She

- 8.2.1 was a student of my institute
- 8.2.2 is an employee under my supervision
- 8.2.3 is known to me (please specify)

(Tick the appropriate box)

Name :
Designation :
Organization :
Membership Number :

Empty rectangular box for recommendation text.

Empty box for date.

Date

Empty box for signature.

Signature