



Bangladesh Health Professions Institute (BHPI)

(The Academic Institute of CRP)

Po: CRP-Chapain, Savar, Dhaka-1343

Phone: 7745464-5, Mobile: 01730059647

Please add
passport size
photography
of student here

Admission Application Form for

B.Sc. in Physiotherapy / B.Sc. in Occupational Therapy/ B.Sc. in Speech and Language Therapy Course

Name of the course: 1.....
(According to preference)
2.....
3.....

Personal Information:

Name of the student : (Use block letter)
(In English as per S.S.C Examination):

(In Bangla as per S.S.C examination):

Contact Number : E-mail ID :

Father's Name:
(In English as per S.S.C Examination):.....

Contact Number : E-mail ID :

Mother's Name:
(In English as per S.S.C Examination):.....

Contact Number :E-mail ID:

Date of Birth: **Religion:** **Nationality:**

Blood Group : **Gender :** Male / Female **Marital Status :** Unmarried/ Married

Do you have any disability or special needs? (Please describe briefly):
.....

Academic information:

Level	Name of Education Board	Year of Passing	GPA	Physics GP	Chemistry GP	Biology GP	Type of Student (✓)
S.S.C							Regular/ Irregular/ Improvement
H.S.C							Regular/ Irregular// Improvement
Total GPA							

Present Address :

Village : Holding /House#

Road #..... Post : P.S : Dist :

Permanent Address :

Village : Holding /House#

Road #..... Post : P.S : Dist :

Legal guardian in case of emergency:

Name :

Village / Area: Holding /House#

Road #..... Post : P.S : Dist :

Contact Number : E-mail ID:

Students must enclose the following attested documents with the application form

- a) Academic Transcript of S.S.C & H.S.C examinations.
- b) Three copies of passport size recent photograph.
- c) Original copy of money receipt for admission form.

All information's given above are true and if found any irregularity or false, any action including cancellation of admission may be taken against me without any notice.

(Signature of the Student)	(Signature of the Guardian)
Date:	Date:
Mobile:	Mobile:

Money Receipt Number:

Date:

To be filled by BHPI office

Department:

Session: 2018-2019 Student ID#

Date of Admission: