

Nurjahan Tower, Plot-8 & 9, Ward-6, Shiromoni, Atra Gilatala, Fultola, Khanjahan Ali, Khulna – 9210. Mobile Phone: +8801769564533 E Mail: registrar.baust.khl.edu.bd@gmail.com Recent Photograph [03 Copies duly attested]

(Color, without glass and face cover showing ear)

APPLICATION FORM (TEACHER)

Position Ap	plied for:				De	partment	t:		
A. PER	RSONAL DETA	ILS:	(PLE	EASE FIL	L IN WITH	CAPITA	AL LETTER	S)	
Full Name:		English:							
		বাংলা:							
Date of Birth	1:	Day:	Mont	th: Y	'ear:	Marital	Status:		Single Married
Age (on Circ	ular End Date):	Day:	Mont	th: Y	'ear:	Gender	:		Male Female
Place of Birt	h:					Birth Re	egistration		
Nationality:						Religion	n:		
NID:						Passpoi	rt Number:		
E-Mail Addr	ess:		Cell Ph		Cell Pho	one:			
D EAR	M W INDODMA	TION						•	
B. FAM	IILY INFORMA	I							
	Name:	English:							
Father		বাংলা:	বাংলা:						
	Occupation:			Work Add designatio	ress (mention):	oning			
	Age:	NID:		J	,		Cell Phone:		
	Name:	English	:				•	-	
26.3	ivaille:	বাংলা:							
Mother	Occupation:			Work Add designatio	ress (mention):	oning			
	Age:	NID:		_	•		Cell Phone:		
	N	English	:				•		
Spouse (If Applicable)	Name:	বাংলা:							
	Occupation:			Work Add designatio	lress (menti on):	oning			
	Age:	NID:					Cell Phone	:	

C.	ADDRESSES	S: (Ple	ase menti	on full address with	h pos	stal cod	le)			
Present Address				Permanent Addr	ess		N	Mailing A	ddress (P	ostal)
D.	ACADEMIC :	BACKGROUN	ND:							
Exami	nation	Education Board/ Varsity	Name o	of the Institution	Nι	gistration umber of Session	&	Year of Passing	GPA/Di Class/	
SSC/Eq	uivalent									
HSC/Eq	quivalent									
Bachelo Equival	or/Honors/									
	s/Equivalent									
M. Phil										
PhD										
E.	TRAINING/C	OURSES (IF A	PPLICABI	ιΕ):						
Serial	Name o	of the Trainin	g	Institution		Country		Duration		
								From	То	Total
F.	EXPERIENC	ES (Latest Fi	rst):							
Serial Designation Last Pay			Scale		D		Duration of Service			
Serial	Designati	/Gros	s Salary	Organization]	From		То	Tot	al

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...... Year Month Day

Total Experience:

G.	G. TEACHING ACTIVITIES UNDERTAKEN:							
	Institution	Courses	Level	No. of	Hrs/wk	Duratio	n	
	mstitution	Taught	(UG/PG)	Students		From	То	

H.	H. SUPERVISION OF THESIS/DESIGN PROJECT AT UNDERGRADUATE (UG)/ POSTGRADUATE(PG) LEVEL:							
		Number	of Project	Level	Number	Du	ration	
	Institution	Thesis	Design		of Students	From	То	

J. RESEARCH GRANTS RECEIVED:								
Organization Offered the	Droingt Title	Granted Amount	Duration					
Grant	Project Title	(equivalent Tk)	From	To				

K. LIST OF PUBLICATIONS: (JOURNAL/CONFERENCE PROCEEDINGS/PRESENTATION)		List them by mentioning authors, title of the paper, Journal/Conference presented at year, volume, number, issue number, pages, etc.					
Serial	Item (Mention Recent to Past and attach pages if required)	Number of Paper(s)	Description	Number of Pages Attached			
(1)	Journal Publication						
(2)	Conference Proceedings						
(3)	Presentation						
(4)	Books/Book Chapters						
(5)	Research monographs, monographs, patents and other works completed and						

contributions in standard		
published books		

L.	REFERENCES (Verifiable):	Name and Address of 03 (three) References (Not Blood Related) who would certify about the applicant's achievements, career, personality, character, etc.					
Serial	Name	Designation	Institution	Cell Phone Number	E-Mail Address		
(1)							
(2)							
(3)							

M.	OTHER INFORMATION:						
Serial	Aspect	Details					
	Names and address of the Teachers/	(1)					
a.	Supervisors under whom studied for higher	(2)					
	degrees	(3)					
b.	Membership/Fellowship						
C.	Professional Awards/ Honours received						
d.	Participation in National Commission, Committees, etc. Commissioned by the Government of Bangladesh and Government Institution/Organizations						
e.	Professional work at National and International Levels						

N. A	. ANTECEDENT (Verifiable):							
Serial	Aspect	Description	Fact					
		Any time from any position dismissed						
(1)	Service	or demoted or severely reprimanded?						
(1)	Record	If yes, mention the organization and						
		reason for it.						
		Anytime punished by any Court of						
(2)	Litigation	Law or lawsuit ongoing for criminal						
		activities? If yes, mention details.						
		Any physical disability or state of						
(3)	Health	chronic/genetic incurable diseases						
		need attention? If yes mention details.						

P. DECLARATION:	
I certify that the information stated above is correct.	
Date:	
	Signature of the Applicant

CHECKLIST

Post Applie	ed for:		Department	
Job Circula	r Reference	e with Date:		
Attached	d additional	pages if required in respective field.		
Tick that	t documents	s you have attached with application.		
Filled up no 4.	prescribed	l application form (BAUSTK F-7.04/PMIS	- 02) 5 pages with appl	icant's signature at page
Photoco	pies of the f	following document attached:		
			Attached I	Oocument
	Ser No	Name of the Course/Event	Certificate	Marksheet
	a.	Secondary School Certificate		
	b.	Higher Secondary Certificate		
	C.	Bachelor of Science		
	d.	Master of Science		
	e.	Master of Philosophy		
	f.	Doctor of Philosophy		
	g.	Experience		
	h.	National ID/ Passport		
	j.	Any Other		
			I	
Bank D	raft/Pay ord	der attached:		
•	Bank Draft,	/Pay order no	Dated:	
•	Amount:	Bank Name:		
•	Branch:			
Envelo	pe with Pos	tage Stamp (2 Pieces, each 10 Tk) attache	d.	
Photog	raphs 3 cop	ies duly attested (Passport PP Size)		
			Signatu	re of the Applicant

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