



Daffodil International University

Daffodil Smart City, Birulia Savar, Dhaka-1216, Bangladesh

Admission Helpline: +8809617901212

E-mail: admission@daffodilvarsity.edu.bd



Paste your unsigned recent color photograph.

Size: 2" X 2"

Admission Application Form



25115N02192

Signature

Admission Form Serial: 25115N02192

Submit Date: 5 November 2024 12:45 PM

A. Admission Information			
Student ID	0242510005101447	Registration ID	251-15-447
Studentship Effect From	1 January 2025	Studentship Expire	31 December 2028
Application Type	Local Student (Bangladesh)	Semester	Spring 2025
Program Type	BACHELOR	Admission Form Fee	1000.0TK (Paid)
Batch	68	Enrollment Type	Spot Viva
Program	B.Sc. in Computer Science & Engineering		
Faculty	Faculty of Science & Information Technology		
B. Student's Information			
Name (As in Certificate)	MD. Rashedul Islam Shihab		
Gender	Male	Religion	Islam
Blood Group	B+	Marital Status	Single
Mobile Number	01312416730	Personal E-Mail	ri.shihab2004@gmail.com
Date of Birth(As in certificate)	31 May 2004	University E-Mail	251-15-447@diu.edu.bd
Country of Birth	Bangladesh	Nationality	Bangladeshi
National ID	2417716087	Birth Certificate No	20043814776200088
C. Address Information			
Present Address		Permanent Address	
Road/Street/Village	Mangnipara, Belamla, Joypurhat 5900	Road/Street/Village	Mangnipara, Belamla, Joypurhat 5900
Post Code	5900	Post Code	5900
Upazila	Joypurhat Sadar	Upazila	Joypurhat Sadar
District/City	Joypurhat	District/City	Joypurhat
Division	Rajshahi	Division	Rajshahi
Country	Bangladesh	Country	Bangladesh
D. Parents' Information			
Father Information		Mother Information	
Father's Name	Md Shahidul Islam Mondal	Mother's Name	Mst Reshma Khatun
Mobile Number		Mobile Number	01766737919
National ID		National ID	6435798548
Date of birth		Date of birth	5 February 1978
Age		Age	47 Years, 4 Months, 7 Days
Occupation		Occupation	Housewife
Designation		Designation	
Organization Name		Organization Name	
Annual income		Annual income	150000.0

E. Local Guardian Information						
Name	Mst Sobnam Mosatari Shimu	Relationship	Sister			
Mobile Number	01749872879	E-mail	sobnamsimu@gmail.com			
National ID	9552642127	Address	North Tolarbag Mirpur-1			
F. Education Expense Bearer / Guardian Group Life Insurance						
Name	Mst Reshma Khatun	Relationship	Mother			
Date of Birth	5 February 1978	Age	47 Years, 4 Months, 7 Days			
Mobile Number	01766737919	E-mail				
National ID	6435798548	Annual Income	150000.0			
G. Educational Information						
Level of Education	Name Of the Institution	Board / University	Group/ Major	Class/ Division/ Grade	Marks/ CGPA	Passing year
Dakhil (Madrasah)	Joypurhat Siddiquia Kamil M.a Model Madrasha	Madrasah	Science Group	Grade	5.0	2022
HSC	Joypurhat Mohabidyalaya	Rajshahi	Science Group	Grade	4.67	2024
H. Passport Information (If Any)						
Passport Number	Issue Place	Issue Country	Issue Date	Expired Date		
I. In case of Credit Transfer from other University (If any)						
Institute Name	Program name	Course Completed		CGPA		
J. Merit Scholarship, Academic Achievements or Award (If any)						
Title	Organization	Date		Country		
K. Professional Experience (If any)						
Company Name	Designation	Department	Country	Start Date	End Date	
L. Others Information						
How you Know the Daffodil International University	DIU Alumni (User Name/ID: 141-19-1548)					
Quota if Applicable:						
Freedom Fighters	No	Tribal	No			
Physical Disorder	No	First Division Player	No			
DIU Employee	No	DIU Alumni	No			
Sibling	No	Spouse	No			
Parental Relationship	No	Daffodil Family Employee	No			
M. Declaration						
a. I declare that the information provided by me in the form is true and correct to the best of my knowledge.						
b. I understand that if the information provided in the form is found to be incorrect, I may be denied admission to this university.						
c. I will also submit hard copies of all uploaded documents along with a printed copy of the application to the appropriate person in the admissions office						
I have read all the rules and regulations of Daffodil International University (DIU), and having understood that if I am admitted into DIU, I will abide by the rules & regulations of this university. I shall accept any decision taken by DIU authority, if I do any misconduct that violates the rules of DIU						

Name of father/legal guardian &
signature with date

Signature of the student with date