

Name of the Training Center/ Association: **BASIS Institute of Technology
& Management (BITM)**
Address of the Training/Association Center: **BDBL Bhaban, 12 Kawran Bazar**
Telephone Number: **+8809612342486 Ext: 201**
Email: **info@bitm.org.bd**
Web Address: **bitm.org.bd**

Photo
(2 Copies)

SEIP Trainee Admission Form

SEID : _____
Course Applied : _____

I. Basic Information

Name : _____

Gender : ☐ Male ☐ Female

Age : _____ (*Must be Below 45)

National ID Number : _____
(Copy of NID to be attached)

Date of Birth (YYYY/MM/DD) : _____

Present Address : _____

Permanent Address : _____

Home District & Upazila : _____

Mobile No : _____

E-mail : (If available) : _____

II. Personal Information

Religion : _____ **Ethnic Group:** _____

Education Level: _____ **Highest Class Completed:** _____ **Year** : _____

Are You Currently Employed? ☐ Yes ☐ No

Family's Monthly Income (BDT) :

Are you physically challenged? ☐ Yes ☐ No

(* if 'Yes') ☐ Seeing ☐ Movement ☐ Hearing ☐ Speech others: _____

Family Information

Mother's Name : _____

Mother's Education Level : _____

Father's Name : _____

Father's Education : _____

Father's Annual Income : _____

Does your family own home? : ☐ Yes ☐ No

Does your family own land? : ☐ Yes ☐ No

Number of brothers and sisters : _____

IV. Declaration:

- 1) I certify that I correctly provide my information and qualifications in the student admission form.
- 2) I express my willingness to render my services to the related industrial sector after completion of the training program.
- 3) I must present 80% of the respective classes .

Signature of Trainee

Date
