



**Ahsanullah University of Science and Technology**  
(Approved by the Government of the People's Republic of Bangladesh and Sponsored by the Dhaka Ahsania Mission)  
141-142 Love Road, Tejgaon Industrial Area, Dhaka-1208

**APPLICATION FORM FOR ADMISSION**  
(Undergraduate)  
**Fall 2024 SEMESTER**



Application No: **2 4 2 0 5 6 0 9**

1. Full Name (as in SSC/GCE 'O' Level) : MD. ZARIF AZFAR
2. Father's Name : MD. AFAZUL ISLAM
3. Mother's Name : NASREEN SULTANA
4. Gender : MALE 5. Religion : ISLAM
6. Nationality : BANGLADESHI 7. Date of Birth : 26-Mar-2005
8. Place of Birth : dhaka
9. Mobile Number : 01986073082 10. Email Address : zaryifazfar@gmail.com
11. Present Address : indiraroad, tollabag
- District: Dhaka, Thana: Tejgaon
12. Permanent Address : indiraroad, tollabag
- District: Dhaka, Thana: Tejgaon
13. Quota : N/A 14. BBA Admission Test Shortlist Process Consent : No
15. Arch. Admission Test Shortlist Process Consent : Yes

**16. Educational Qualifications:**

Examinations	Board/Institution	GPA	Year of Passing
SSC/O-Level/Equivalent	DHAKA	5.00	2022
HSC/A-Level/Equivalent	DHAKA	4.75	2024

**17. Emergency Contact Information:**

- Contact Name : 01712953176 Contact Relation : 01715177030
- Contact Number : 01871541861 District & Thana : DHAKA, TEJGAON

**18. Name & Address of the Guardian who will bear the cost of education:**

(Academic and other records of the student may be delivered to this person)

Name : Md Afazul Islam Relationship : Father

Mobile : 01986073082 Annual Income : 7000000 BDT  
(Approx.)

Address : Indiraroad,Tollabag , Thana: Tejgaon, District: Dhaka

**19. Choice List: Your choice for the faculty of Engineering:**

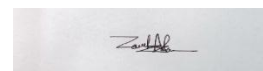
1	2	3	4	5	6
CSE	ME	CE	IPE	EEE	TE

**20. Declaration:**

I do hereby declare that the information as stated in the Admission application form is true. If any of the information is found incorrect, my admission is liable to be cancelled.

If any of the certificates/academic transcripts/documents attached with this form is found altered/forged, my admission is also liable to be cancelled.

I also declare that I will abide by all the existing as well as any new rules and regulations of the University, if made in future, and the orders of the AUST authority; otherwise my admission is liable to be cancelled.


**Signature of the Applicant**

Date : 19-Feb-2025

**Student ID****FOR OFFICE USE ONLY****(DO NOT WRITE ANYTHING BELOW THIS LINE)**

Name of the applicant (As in SSC/O-Level): .....

The student bearing the above particulars with Merit Position: ..... Payment TransactionID:.....

has been selected for admission in the following department in the First Year First Semester (Fall 2024)

S/N	Program	Student ID	Date

Verified By:.....

(Verification Committee)

Date : .....

**Signature of the Admission  
Committee's Chairman**

Date : .....

**Signature of the Registrar**

Date : .....