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বাংলাদেশ কম্পিউটার সোসাইটি
BANGLADESH COMPUTER SOCIETY

Photograph
3 Copies
(35 mm x 35 mm)

MEMBERSHIP APPLICATION FORM

1. Applied For	<input type="checkbox"/> Fellow	<input type="checkbox"/> Member	<input type="checkbox"/> Associate	<input type="checkbox"/> Graduate	Student
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2. Applicant's Name*			
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3. Father's Name	
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4. Mother's Name	
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5. Spouse's Name	
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6. Designation	
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7. Organization	
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8. Mailing Address (Detail)	
	Post Code :

Phone Number	Office :	Residence :
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Fax Number		Mobile :
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E-mail		URL :
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9. Permanent Address	District :	Upazila :	10. Nationality :	
	Post Office :	Village :	11. Blood Group :	
	Road :	Block :	12. Date of Birth :	
	House :	Post Code :	Sex	M

13. Academic Career (Record from last achievement)

Qualification/Degree	Institution	Board/University	Year of Passing	Score/Class

14. Training Obtained (Record from last achievement ; use extra page if necessary)

Training Institute with Country	Name of Topic/Course	Duration (Week)	Training Year

*Name - First Name/Middle Name/Last Name

