

# Patuakhali Medical College, Patuakhali

Admission Year  Fiscal Year  Scholarship   
Scholarship Type  Scholarship Exam\*

## Personal Info

Student's Name (Bangla)  Student's Name (English)

Father's NID  Father's Date of Birth

Father's Name (Bangla)  Father's Name (English)

Mother's NID  Mother's Date of Birth

Mother's Name (Bangla)  Mother's Name (English)

Student's Birth Certificate Number  Student's Date of Birth

Student's Gender

## Permanent Address

Division  Union

District  Ward No

Upazila  Post Code

Pourasava  Address

## Educational Info

### Previous Educational Info

Division  Class studied in   
the past

District  Previous Educational Level

Upazila  Registration No

Pourasava  Result (GPA)

Board/University  Passing Year

Institute Name

### Current Educational Info

Division	<input type="text"/>	Group	<input type="text"/>
District	<input type="text"/>	Class	<input type="text"/>
Upazila	<input type="text"/>	Section	<input type="text"/>
Pourasava	<input type="text"/>	Roll	<input type="text"/>
Institute Name	<input type="text"/>	Student ID	<input type="text"/>

### Guardian Info

Relation	<input type="text"/>	Birth Certificate Number	<input type="text"/>
Guardian NID	<input type="text"/>	Date of Birth	<input type="text"/>
Name (Bangla)	<input type="text"/>	Name (English)	<input type="text"/>
Occupation	<input type="text"/>	Maximum Educational Qualification	<input type="text"/>
Mobile	<input type="text"/>	Maximum Educational Qualification of Spouse	<input type="text"/>
Email	<input type="text"/>		

### Permanent Address

Division	<input type="text"/>	Union	<input type="text"/>
District	<input type="text"/>	Ward No	<input type="text"/>
Upazila	<input type="text"/>	Post Code	<input type="text"/>
Pourasava	<input type="text"/>	Address	<input type="text"/>

### Payment Details

Payment Mode	<input type="text"/>
Account Holder's Name	<input type="text"/>
Account No	<input type="text"/>
Branch name	<input type="text"/>

এই ফরমটা সঠিক ভাবে পুরোন করে পটুয়াখালী মেডিকেল কলেজের ই-মেইল নম্বরে পাঠিয়ে দেন **Capital Ward** এ লিখতে হবে।  
যদি লেখায় ভুল হয় তার জন্য কলেজ কর্তৃপক্ষ দাই নয়।

**E-mail: patuakhalimc@ac.dghs.gov.bd**