ENTRY FORM FOR JAIBB

JAIBB Examination, Month ---------------------, Year ---------------------

1. Full name (as written in SSC): (a) In English: ________________________________ (Block Letters)
2. Father’s name (as written in SSC): (a) In English: ________________________________ (Block Letters)
3. Mother’s name (as written in SSC): ________________________________ (Block Letters)
4. Date of Birth (As per SSC): ---------------------
5. Educational Qualification: ________________________________
6. Official Address:
   (a) Name of Bank/Financial Institution: ________________________________
   (b) Designation: ________________________________, (c) Branch & Addr: ________________________________
   (d) Working District: ________________________________, (e) Department/Section: ________________________________
   (f) Mobile No.: ________________________________
7. Subject/s passed/ intended to be appeared in:
<table>
<thead>
<tr>
<th>Sl No.</th>
<th>Subject</th>
<th>Month &amp; year of passing</th>
<th>Roll No.</th>
<th>Attested 1(One) copy recent passport size photograph (Staple here)</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Principles of Economics &amp; Bangladesh Economy</td>
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<tr>
<td>2</td>
<td>Business Communication</td>
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<td>3</td>
<td>Organization Management</td>
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<td>4</td>
<td>Laws and Practice of Banking</td>
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<tr>
<td>5</td>
<td>Marketing of Financial Services</td>
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<td>6</td>
<td>Accounting for Financial Services</td>
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</tbody>
</table>

Description of fees paid
Examination Fee --------------Tk. D. D. / P. O. No. --------------Date --------------
Bank & Branch: ________________________________, Date: ________________________________

I declare that the informations furnished above are correct. If any information mentioned above is found to be incorrect/wrong, I shall be held responsible for the same.

Signature of the candidate with Date
I certify that the above candidate is under job in (Name of Branch/ H.O./ Z.O.) ________________________________/
(Name of Division/ Department/ Section) ________________________________, (Name of Bank/ Financial Institution) ________________________________
 as (Designation) ________________________________, I have verified his/ her signature.

Signature with Date (Seal of the Manager/ concerned Officer).