



IUB-MPH Application Form

Paste 4 passport size Photos here.

Photo



Master of Public Health

FULL NAME:

OFFICE USE

Application SL No .

Student ID No

Date Received

Received By

Please Mail To:

**Master of Public Health
Independent University, Bangladesh**
 Plot 16, Block B, Aftabuddin Ahmed Road, Bashundhara R/A, Dhaka-1212
 Phone: +88-02-8431645-53, 8432065-76, Ext-2511, Mobile: +88-01732-040680
 Email: sphmanager@iub.edu.bd, Webpage: www.iub.edu.bd

Application Form for Admission

(Please print legibly in dark ink)

1 Personal Information

| | |
|---|------------------------------------|
| Family Name / Surname | First / Other Name(s) |
| Mailing address | |
| | |
| Post code | Country |
| Telephone | Fax |
| E-mail | |
| Sex <input type="checkbox"/> Male <input type="checkbox"/> Female | Date of Birth (Day / Month / Year) |
| Citizenship | Native Language |

2 Academic History

| Have you ever been required to withdraw from any employment? <input type="checkbox"/> Yes <input type="checkbox"/> No. | <i>If YES, please explain fully. (use a separate sheet)</i> | | |
|---|---|---------------------------|-------------------------|
| Have you ever been required to withdraw from any school or college? <input type="checkbox"/> Yes <input type="checkbox"/> No. | | | |
| <i>Please provide names of all institutions attended (Please start with SSC / O'level / equivalent)</i> | | | |
| Name of the Institution | Year (From - To) | Name & Date of the Degree | Division / Grade / CGPA |
| | -- | | |
| | -- | | |
| | -- | | |
| | -- | | |
| | -- | | |

3 Career History --- (Most recent on top)

| Date employed | Company | Position held |
|---------------|---------|---------------|
| | | |
| | | |
| | | |
| | | |
| | | |

4 Personal Essay (Your answers should be typed and double-spaced)

This essay section of the application helps the admissions committee know you better as an individual. We want to admit a diverse and interesting group of students who will contribute to and benefit from the IUB-MPH Program. We are interested in the experiences and qualifications that distinguish you from other applicants.

Please respond to the following question.

Why are you applying to the IUB-MPH Program; what do you hope to experience and contribute; and what are your plans and goals after you receive your MPH? (600 words)

5 Local Guardian's Information *(to be contacted in case of emergency)*

| | |
|--|---|
| Name | |
| Relationship with the student <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other | <i>If other, specify the relationship</i> |
| Contact address | |
| E-mail | Telephone |

6 Financial Guarantor's Information *(All correspondence including academic transcripts will be mailed to the address mentioned here)*

PLEASE NOTE: The financial guarantor must have a source of income and should be able to provide proof if requested.

| | |
|---|---|
| Name: | |
| Relationship with the student <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other | <i>If other, specify the relationship</i> |
| Occupation | |
| Mailing address (permanent) | |
| | |
| Postal Code | Country |
| Telephone | Fax |
| E-mail address | |
| I declare that the particulars provided in this application are accurate. I also declare that I will abide by the rules and regulations framed by the University authorities. | |
| Signature of Financial Guarantor | Date |

7 Student Agreement

| | |
|--|-------|
| <p>If admitted I agree:</p> <ul style="list-style-type: none"> ✓ Not to seek an unfair advantage over other students, including but not limited to giving or receiving unauthorized aid during completion of academic requirements. ✓ I Shall not adopt or encourage to adopt any unfair means in prosecution of any part of academic requirements. ✓ To truthfully represent fact and self at all times. ✓ To respect the property and personal rights of all members of the IUB community. <p>I certify that all statements here and in the application for admission to IUB are correct. I agree that all documents submitted in support of the application becomes the property of Independent University, Bangladesh (IUB). I authorize the University to release information from my application and supporting documents to authorities and organizations providing financial assistance/fellowship to permit me being considered for such support.</p> | |
| Signature of Applicant: | Date: |



Check-list *(Please read carefully)*

- Please read the entire form before answering the questions.
- Check, if you have ATTACHED the following information with the application form.
 - **Detailed C.V.**
 - **Two sets** of copies of your mark-sheet(s)/academic transcript(s), certificate(s), and testimonial(s) attested by the respective institutions or issuing authorities, Bachelor Degree onwards.
 - **Four copies** of your passport size photograph.
 - **One copy** of personal Essay. *(Item # 4)*
 - **Two letters** of Recommendation, one of which should come directly from a faculty member of the last institution attended.