

Bangladesh Computer Council [Information and Communication Technology Division]

For Office Use Place of Application: □ BCC, □ HWBTCL Application SI. No: □ Registration No:	Passport Size Photographs (2 Copies)					
Date: Authorized Signature						
Application Form						
Course Title (Select one):						
BPM (Business Process Management) / BPO (Business F	Process Outsourcing)					
Prefered Shift/Time: ☐ Morning (09:00-01:00) ☐ Da	y (01:00-05:00)					
Applicant's Information:						
Name :						
Father's Name :						
Mother's Name :						
Contact Address :						
PO PS/Upozila:	District:					
Permanent Address :						
POPS/Upozila:	District:					
Date of Birth (dd/mm/yyyy):	Gender: □ Male □ Female					
Nationality :T	elephone No:					
Mobile :e-	mail:					
Name of the 2 (Two) responsible persons on behalf of the	applicant:					
Contact Person1 Cont	act Person2					
Name : Nam	e:					
Address: Addr	ess:					
	act No. :					
	P.T.0					
(To be filled by office)						
Bangladesh Con	nouter Council					
[Ministry of Posts, Telecommunication						
Application Place: ☐ BCC, ☐ HWBTCL SI No.:	Date:DD/MM/YYYY					
Course Title :						
Applicant's Name :						

Academic Information:

Examination Name/Roll	Passing Year	Duration (in Years)	Discipline /Group	Division/Class or CGPA
SSC/Equivalent Roll:				
HSC/Equivalent Roll:				

I certify that this application	n, and the evidence	e submitted with	h it, is all true and o	correct. I am agree to
abide by all the rules and r	egulations of this Ir	nstitute.		

Date	(Name & Signature of the Applicant)

Enclosure:

- 2(two) copies of passport size Photographs
 Copy of National ID Card.
 Copies of SSC & HSC Certificate

**ANY WRONG INFORMATION FURNISHED IN THE APPLICATION FORM WILL BE TREATED AS DISQUALIFICATION