



Application Form

Postgraduate Diploma in Textile Industry Management (PGD-TIM)

Name (As per SSC Certificate): _____ Date of submission: _____

Father's Name: _____ Mother's Name: _____

Address: A) Permanent: _____

B) Present: _____

NID NO: _____ Date of Birth: _____ Mobile No: _____

dd mm yyyy

Nationality: _____

Category Criteria: Category A (Experienced) Category B(Fresher)
 Category C (Female Candidates) Category BTMA

Academic Degree:

Degree	Name of the Institution	Year of Passing	Class/CGPA

Is Experienced in Textile Industry? _____ Total Experience (Year) _____ E-mail: _____

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Experience in details (Current):

Position	Department	Organization	Duration (From-To)
			dd/mm/yyyy – dd/mm/yyyy

Experience in details (Most Recent):

Position	Department	Organization	Duration (From-To)
			dd/mm/yyyy – dd/mm/yyyy

English Proficiency Record (If any): _____

Have you taken any SEIP training before? If yes, duration of training: _____

Declaration

I declare that all the above information are correct and I assure that I will abide by all the rules and regulations of the Postgraduate Diploma in Textile Industry Management (PGD-TIM) program.

Signature of the Applicant

Date