

Office Secretary Signature

## WM-ASDS Admission Form for Summer 2025 Semester

## **Department of Statistics and Data Science**

Jahangirnagar University

Masters in Applied Statistics and Data Science (ASDS) under Weekend

Program

Please attach your PP size photo here

Signature of the Coordinator

## **ADMISSION FORM**

Applicant's Name: (According to Certificate	e)					
Applicant's Name: (In Bangla)						
Personal Information:						
Father's Name	:					
Mother's Name	:					
Nationality	:					
Date of Birth	:	Sex:				
Permanent Address	:					
Mailing Address	:					
Mobile Number	:		E-n			
Academic Information:						
Name of the Degree/Exam Group/Subject		Board/Univ	ersity	CGPA/GPA/Class	Year of Passing	
Professional Information:						
Name of the Organization			Designat	Designation		Contact Person
ঘোষণা পত্ৰঃ						
ক্রোব । ব্যাব । ব্যা						
FOR OFFICE USE						
Applicant's Name: (According to Certificate)						
ID NUMBER 2 0 2 5 1 7						