



# KRISHIBID INSTITUTION BANGLADESH

## Central Executive Committee

KIB Complex, North Block, Level-II & III, Krishi Khamar Sarak, Farmgate, Dhaka-1215  
Telephone : 9114139, 9114107, Fax : 9126809, Mobile : 01711-402895  
E-mail: krishibidinstitution@yahoo.com, Web: www.kib.org.bd

Attach two  
copies attested  
colour photograph  
with graduation  
certificate

### REGISTRATION FORM

Registration No \_\_\_\_\_ (To be filled in by the Office)

- Name (Block Letter) : **KRISHIBID** .....
- Father's Name/Husband's Name : .....
- Mother's Name : .....
- NID No. : .....
- Permanent Address : Village : ..... Post Office : .....  
Upazilla : ..... District : .....  
Telephone : ..... Mobile : .....
- Present Address : .....  
Telephone : (Office) ..... (Res.) ..... Mobile : .....  
Fax : ..... E-mail : .....
- Occupation : ..... Designation : .....  
Name of the Organization : .....
- Blood Group : ..... 8. Date of Birth : .....
- Brief Description of Present Area of Professional Activities (if any) .....
- Educational Status (From Graduation) :

Qualification	Session (According to Certificate)	Name of the University/Institution

Signature of the  
**Secretary General**  
Central Executive Committee

Signature of the  
**General Secretary**  
Local Chapter .....

Signature of the Applicant  
and date .....