



বাংলাদেশ বেসরকারি নার্সিং ইনস্টিটিউট ও কলেজ ওনার্স এসোসিয়েশন  
Bangladesh Private Nursing Institute & College Owners Association

Address : M-1/6, Mirpur-14, Dhaka-1216

Phone : 01715-067370, 01704-8938883, 01718-661666, E-mail : bnursingassociation@gmail.com



## MEMBERSHIP FORM

Sl. No. **066**

Please Affix your  
Photograph with your  
Signature  
(Do not Staple)

NAME OF THE APPLICANT : .....

INSTITUTE/COLLEGE NAME : .....

INSTITUTE/COLLEGE ADDRESS : .....

NID NO : ..... EDUCATIONAL QUALIFICATION : .....

DATE OF BIRTH : ..... MARITAL STATUS :  SINGLE  MARRIED

FATHER'S NAME : .....

MOTHER'S NAME : .....

MAILING ADDRESS : .....

PERMANENT ADDRESS : .....

TELEPHONE /CELL PHONE : ..... E-MAIL : .....

SPOUSE NAME : .....

DECLARATION:

I HEREBY CONFIRM THAT INFORMATION PROVIDED ABOVE IS TRUE AND CORRECT.

APPLICANT'S SIGNATURE

DATE

Sl. No. **066**

FOR OFFICE USE ONLY

Mr./Mrs. .... is selected for the  
Permanent Membership of Bangladesh Private Nursing Institute & College Owners Association

PRESIDENT

GENERAL SECRETARY