

**RECOMMENDED FOR POST GRADUATE PROGRAM**



**BIRANA COLLEGE**

**APPLICATION FORM OF ADMISSION FOR POST\_GRADUATE STUDIES**

*This application form should be filled in block letters*

**Program;**

Regular/Monday to Friday **2:00-11:30**

Weekend /Saturday and Sunday **2:00-11:30**

Night /Monday to Friday **11:30-2:30**

Academic Year: \_\_\_\_\_ E.C

1. The applicant here by applies for admission to the graduate program at the:

Name of the Graduate program: Msc, MBA or MA in \_\_\_\_\_

2. Personal information

Name _____	Fathe's Name _____
Grand Fathe's Name _____	
Date of birth _____	Nationality _____
_____/_____/_____ G.C	sex _____
Current Address _____	
Telephone / Mobile _____	
Email;-----	

3. Professional background

**Academic degree obtained from recognized institution**

<b>Title of degree</b>	<b>Institution</b>	<b>year of completion</b>