



**Application Form for Transcript
(Only for those, who received Original Certificate without transcript)**

**Application form is available at the department/also in the website.
Please submit this form to the Departmental Admin. Officer (DAO)**

Student Name (as per last degree certificate)	
Registration No.:	
Department :	
Major Area of Student (only for MBA & EMBA):	
Completing Semester:	
Emergency Contact Number :	
Date of Birth :	

***Attachment: 1. Photo copy of UAP Original Certificate**

Signature of the Student

Date:.....

****FOR OFFICE USE**

Submission Date	Tentative Date of Delivery	Received by
		_____ DAO/DAAO
1 Recommendation of Department. _____ AO/DAAO	2 Academic transcript may be issued. _____ Controller of Examinations	



Student Name :
Registration No:
Department:



Student Copy

Transcript (Only for those, who received Original Certificate without transcript)
(Examinations Office: 74/A, Green Road, Dhaka- 1205)

Submission Date	Tentative Date & time of Delivery from Exam. office	Received By
	Date..... & time 3:00 pm to 5:00 pm	_____ DAO/DAAO

*** Delivery time: 3:00 pm to 5:00 pm (Sunday to Thursday), Contact number: 58157091-4, Ext. 145, e-mail: examctrl@uap-bd.edu

NB.: # Student copy must be surrendered at the time of taking delivery the Transcript

#Authorization letter is necessary if the student would like to receive the Transcript by his/her representative. In such case, submit authorization letter as per sample (samples are available in the website of UAP).