

Chittagong University Museum

Application for using the Museum Collection

Appendix: 1
Rule: 8()
The meeting of the Trust.

۱.	Name of Applicant :		
2.	Father's Name:		
3.	Present Address :		
4.	Permanent Address :		
5.	Nationality:		
6.	Date of Birth:		
7.	Academic Qualification:		
8.	Purpose for using the Museum Collections:		
 Subject of Research (if any) Recommendation of the Supervisor/Head of the Institution or Department 			
	Official Seal	Signature of Supervisor / Head of the Institution or Department Date: Name: Address:	
lυ	ndertake to abide by the rules	and regulations of the Museum.	
Da	te:	Signature of the applicant.	