



Government of the People's Republic of Bangladesh
Press Information Department
Bangladesh Secretariat, Dhaka
www.pressinform.portal.gov.bd

Photo
(1 PP &
2 Stamp
size)

Application form for Press Accreditation Card

Put 'X' Mark	Permanent	<input type="checkbox"/>	Temporary	<input type="checkbox"/>	Freelance	<input type="checkbox"/>
Personal Information						
Name	Bangla : _____					
	English (In Block Letters) : _____					
Father's Name	_____					
Mother's Name	_____					
Address :	Permanent			Present (Temporary)		
	_____			_____		
Telephone			Online Contacts			
Office	_____			E-mail	_____	
Residence	_____			Facebook	_____	
Cell	_____			Cell	_____	
Date of Birth	(Day/Month/Year)	Birth Place (District)	Nationality	NID Number		
	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Educational Qualification	_____					
Blood Group	<input type="text"/>					
Information of the Prevailing Organization						
Designation	Bangla : _____					
	English : _____					
Organization	Bangla : _____					
	English : _____					
Date of Joining	_____			Type of Job	Permanent/Temporary/...	
Present Address of the Organization	_____					
	Phone	_____		Fax	_____	
	_____		Website	_____		

Information of the Previous Card (if any)

Card Number :		
Type of Card (Permanent /Temporary)		
Date of first issue		
Date of last issue and period		
Card issued from last organization		
Designation mentioned in the last Card		
Information of other organization & experience (if any)		
Attachment to other organization (if any)		
Organization	Designation	Period

[New applicant has to submit photocopy of experience certificate, appointment letter, NID and necessary documents from the organization(s)]

Attestation

I, hereby, declare that information given in the form is fully true.

Signature of the Applicant

Date :

Recommendation

I recommend that an accreditation card be issued for Mr./Ms. following Press Accreditation Guide Lines 2003.

Signature & Seal of the Editor/Head of the Organization

Date :



Specimen Signature of the Applicant:

Initial	Initial	Initial