



# RTM AL-KABIR TECHNICAL UNIVERSITY

Campus: TB Gate, Tultikor, Sylhet, Bangladesh

Telephone: +880 1720 532169, 01766857322 | Email: admissions@rtm-aktu.edu.bd; info@rtm-aktu.edu.bd

## Waiver Application Form

Waiver Form No.:

Date of Waiver Application:

Student ID Number

Date of Admission

- Name of Applicant (As per University's Record Book): ..... (Bangla)  
..... (English – all capital letter)
- Contact Number: ..... 3. Email: .....
- Application for admission in Spring  Summer  Year:
- Name of Program: ..... 3. Batch: .....

## Request for Waiver

### Category of Waiver:

- Waiver for Course / Credit: - Course: \_\_\_\_\_ Credit waiver: \_\_\_\_\_
- Fee Waiver for Academic attainment \_\_\_\_\_  
[Attached Transcripts]
- Fee Waiver for Poor/Meritorious \_\_\_\_\_  
(Attached Certificate from Chairman UP/Pourashava, City Corporation Councilor OR First Class Gazetted Officer)
- Fee Waiver for Freedom Fighters Son/Daughter (Attached attested Certificate of Freedom Fighter)
- Studying Brother/Sisters Waiver \_\_\_\_\_
- At a time payment discount \_\_\_\_\_
- Others (if any) \_\_\_\_\_  
\* Student may attach any other document in support the request.

**Declaration:** I do hereby declare that all the information given above is correct. If any information found fake or any discrepancy arise in future, it will automatically disqualify my admission from the University without showing any reason. I will abide by the rules and regulations of the university including code of conduct and other policies, which will be issued by the university authority.

Signature with date of Applicant

Signature with date of Parents/Guardian

## Recommended Credit Waiver and Financial Aid (Office use only)

Waiver	Description
--------	-------------

Signature with date of Admission Officer

Signature of the Head of Equivalence Committee/Admission Committee

Signature with date of Finance Director

Signature of the Registrar

Signature of the Treasurer