

Student Application Process Flow

Student from fill-up the provided information:

1. Basic Information Entry
2. Education Information
3. Document Upload
4. Image & Signature Upload
5. Payment
6. Application Submission
7. Admit Card Download

Student Application Process

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CMU ADMISSION PORTAL

Test

You can apply for admission.



Click here to start your application process



Notices

MD Admission Circular 2026-27 : [Download](#)

Chittagong Medical University (CMU)

Address: Chittagong, Bangladesh-

Telephone: 88-09666911463,

Fax: 880-2-*****



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SELECT FACULTY

Available Faculties

School Name	Start Date	End Date	Fee	Action
Faculty of Medicine	25/04/2026	15/05/2026	BDT 10 (+ Charge)	APPLY

 **Need help?** Please visit [CMU Official Website](#) for program details.



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Subject you are applying for

MD (Infectious Disease & Tropical Medicine)

[NEXT](#)

 Please visit [CMU Official Website](#) for more information about programs.

Purchase Form

Info!

- (*) Indicates required field.
- Please note that this is not the final application. After successful payment candidate will get Admit Card.

BASIC INFORMATION

Candidate Category*

 Govt. Candidate Non Govt. Candidate

1. Full Name of the Candidate*

2. Mother's Name*

3. Father's Name*

4. Spouse Name (If applicable)

5. Date of Birth*

Gender*

Mobile No. (for SMS)*

Candidate will not receive Username and Password, if number is in wrong format.

6a. Nationality*

6b. National ID*

7. Religion*

8. Marital Status*

9. E-mail Address*

10. BMDC No.

11. Issue Date

12. Expiry Date

13. Full Address of Correspondence*

14. Permanent Address*

Educational Information

SSC / O-Level / Equivalent

Institute*

Board*

--Select Board--

Exam Type*

--Select Exam Type--

Group*

--Select Group--

Division/Class*

--Select--

GPA*

GPA (x.xx or x)

Passing Year*

Select

HSC / A-Level / Equivalent

Institute*

Board*

--Select Board--

Exam Type*

--Select Exam Type--

Group*

--Select Group--

Division/Class*

--Select--

GPA*

GPA (x.xx or x)

Passing Year*

Select

Bachelor

Bachelor Bachelor (Pass)

Institute*

Program/Degree*

Others*

Division/Class*

CGPA*

Passing Year*

Save Educational Information

Masters

Institute

Program/Degree

Others

Division/Class

CGPA

Passing Year

! Documents to submit

Document Type

01(one) Year Internship Certificate

Select File:

Choose File No file chosen

Upload Document

SL#	File Type	File Name	Action
1	SSC Certificate	2604100002-SSC-Certificate.pdf	Download Remove
2	HSC Certificate	2604100002-HSC-Certificate.pdf	Download Remove
3	MBBS Certificate	2604100002-MBBS-Certificate.pdf	Download Remove
4	01(one) Year Internship Certificate	2604100002-01(one)-Year-Internship-Certificate.pdf	Download Remove

! IMPORTANT REQUIREMENTS

📷 PHOTO

- ✓ Passport size photo on solid background
- ✓ Size: 300x300 pixels
- ✓ Max 150KB (JPEG/JPG)

✍️ SIGNATURE

- ✓ Clear signature on white background
- ✓ Size: 300x80 pixels
- ✓ Max 150KB (JPEG/JPG)

📷 Passport size photo **REQUIRED**



Drop photo here or click to browse

JPG - max150KB

 Crop and adjust your photo

File size: 150KB



Photo uploaded

✍️ Signature **REQUIRED**



Drop signature here or click to browse

JPG - max150KB

 Crop and adjust your signature

File size: 150KB



Signature uploaded



Enter the code shown.

Submit And Payment



4:49

Edusoft Consultants Ltd



Support



FAQ



Offers



Login

CARDS

MOBILE BANKING

NET BANKING

Please login to show your saved wallets



By checking this pay button you agree to our [Terms of Service](#) which is limited to facilitating your payment to **Edusoft Consultants Ltd.**

Amount : ₳ 10.00

Additional Fees: ₳ 0.26 ⓘ



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Your bKash Account Number

01615040699

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Cancel

Confirm



16247

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NAVIGATION

DOWNLOAD ADMIT CARD

Review Application

CANDIDATE PROFILE

Payment ID	2604100001
Applicant Name	MOHAMMAD ALI
Date of Birth	10/08/1999
Payment Status	Payment Completed

OFFICIAL PHOTO



TRACKING

Submission



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MOHAMMAD ALI

[Logout](#)

Admit card

SL		
1.	Faculty of Medicine	Download



Chittagong Medical University

Admit Card

Non Govt. Candidate

Admission Test for MD Phase-A Residency Program Session 2026-2027

Application No : 2604100001
BMDC Reg. No : 12345nfjvod
Name : MOHAMMAD ALI
Faculty : Faculty of Medicine, CMU
Course & Discipline : MD (Infectious Disease & Tropical Medicine)
Institute : BITID, Chattogram
Venue : Chittagong Medical University, Faujdarhat, Chattogram
Date & Time : 12.06.2026 at 10:00:AM



A handwritten signature in black ink, appearing to read 'Mohammad Ali'.

Applicant's Signature

Instructions to Examinee:

1. Admit Card must be shown at the time of entrance as well as during examination.
2. Candidate are requested to enter into the examination hall by 10:30 AM sharp.
3. Candidates should bring black ball point pen in the examination hall to tick mark the answer sheet.
4. It is prohibited to bring any of the electronic device like mobile phone, wrist watch, bags, calculator any other electronic gadget in the examination hall. Otherwise the examination of the particular examinee will be cancelled.
5. Candidates are not allowed to take question paper from examination hall after the examination.
6. Candidates must remain seated till the Answer scripts & Question papers are collected by the hall investigators. Candidates are not allowed to leave the examination hall before 12:30 PM.
7. If any candidate changes his/her seat or adopts any kind of unfair means during examination, his/her examination will be cancelled & answer scripts will be withdrawn and examinee will be subjected to legal proceedings as per procedures of Chittagong Medical university.
8. Candidate shall abide by the instructions of the Hall in-charge, investigators and CMU administration.
9. Violation of any of the above mentioned instructions will lead to serious adverse disciplinary action.

**Controller of Examinations
Chittagong Medical University**

