



# The Institution of Engineers, Bangladesh

## Dhaka Centre, Ramna, Dhaka-1000

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### On the occasion National Mourning Day- 2017

### Voluntary Blood Donation Program

#### Blood Donor Consent Form

Name of Engineer : .....

IEB Membership No. : .....

Phone No. : ..... (R) ..... (O)

Cell No. : .....

E-mail Address : .....

Present Address : .....

Your Blood Group : ..... Time of last meal: .....

Have you donated previously :  Yes  No

If yes, how many occasions : ..... When last: .....

Have you any reason to believe that you may be infected by:

Hepatitis/Malaria/HIV/Venereal disease:  Yes  No

In the last 6 months have you had any history of the following:

Unexplained weight loss

Swollen Glands

Repeated Diarrhea

Continuous low- grade fever

Donor Signature with date

Honorary Secretary