

SHAHEED BENAZIR BHUTTO UNIVERSITY



SHERINGAL, DISTRICT DIR-UPPER

REGISTRATION FORM (MS/M.Phil/Ph.D)

Picture

Name of Institution/ Campus _____

Name of the Program/Degree. _____

Session _____

PERSONAL DATA: (Fill in Block Letters)

Name _____

Father's Name _____

Date of Birth (in figures) _____ (in words) _____

Domicile _____ CNIC No. _____

Mailing Address _____

Permanent Address _____

Phone# _____ Cell# _____

E-Mail Address _____

ACADEMIC DATA:

Name of Last Exam Passed: _____ Roll No. _____ Year _____

Obtained Marks/ CGPA. _____ Total Marks/GPA. _____ Percentage. _____ Division. _____

Institution/ Department. _____

University. _____

Major Subjects. _____

COURSES IN WHICH TO BE REGISTERED:

S.No	Course Name	S.No.	Course Name
1.		5.	
2.		6.	
3.		7.	
4.		8.	

RESEARCH PROPOSALS (USE SEPARATE SHEET(S) FOR DETAIL PROPOSAL)

S.No	Proposal Title
1.	
2.	
3.	

Countersigned

Signature of Student

Head of the Department/ Institute

INSTRUCTIONS

The following documents must be attached with the form

- a. An attested copy of each of the certificate passed.
- b. An attested copy of self CNIC.
- c. Three attested 1 x 1 size recent coloured photographs
- d. Original Migration certificate from the concerned University, other than Shaheed Benazir Bhutto University.
- e. Original Bank receipt of Rs.2000/- as Registration Fee.

OFFICE USE ONLY

Registration No. _____ Allotted

1. Entered by: _____ (K.P.O)

2. Checked by: _____ (ACE)

3. Confirmed by: _____ (CE/DCE)