



(EXAMINATIONS DEPARTMENT)

APPLICATION for ISSUANCE OF

TRANSCRIPT CERTIFICATE

Please Tick (✓) following

☐ MUET

☐ SZAB

☐ ORDINARY

☐ CEAD

☐ URGENT

☐ HIAST

☐ GCT

☐ HCST

NOTE. DEAR CANDIDATE KINDLY FILL THE FORM AS PER ENROLMENT CARD RECEIVED FROM DIRECTORATE OF ADMISSIONS

Dated: _____

ID No: _____

Enrollment No: _____

Name (in capital letters): _____

Father's Name: _____ Surname: _____

CNIC NO. _____

Nationality: _____ Date of Admission _____

Year of Passing _____ Contact No _____

Address: _____

Bank Challan No _____ Dated _____ Amount Paid. _____

FEES/ORIGNAL /DUPLICATE/CORRECTION WORKING DAYS

DEGREE PROGRAMS	ORDINARY		URGENT	
	FEES	DAYS	FEES	DAYS
BACHELOR/B. TECH/BSIT/CEAD/MASTERS/Ph.D.	2570	10	3570	05 (subject to availability of signing authorities)

PARTICULAR DOCUMENTS REQUIRED.

- ORIGINAL BANK CHALLAN
- ATTESTED COPY OF PASS CERTIFICATE
- ATTESTED COPY OF ENROLLMENT CARD (A4 SIZE PAGE).
- ATTESTED COPY OF CNIC (A4 SIZE PAGE).
- ATTESTED COPY OF ALL MARKS CERTIFICATES (FOR 12 & BACKWARD BATCES FOR BACHELOR BE, ONLY).
- ATTESTED COPY OF ALL MARKS CERTIFICATES FOR Ph. D MASTERS, B. TECH, BSIT, CEAD AND AFFILIATED COLLEGES.

NOTE. DEAR CANDIDATE CERTIFICATE APPLIED ORDINAY OR URGENT MAY BE LATE OF OLD BATCHES, (12 BACKWARD) AND AVAILABILITY OF SIGNATURE AUTHORITY.

SIGNATURE OF THE CANDIDATE

OFFICE USE ONLY

BOOK NO. _____

CERTIFICATE NO. _____