Form 1



University of Sahiwal APPLICATION FOR ADMISSION (Year 20___)

Form No
(For Office Use)
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With blue
background

IMPORTANT INSTRUCTIONS:

- 1. Please tick the box according to the program applied for.
- 2. Incomplete applications shall not be entertained.
- 3. Any incorrect information provided in this form may lead to disciplinary action or cancellation of admission at any stage.
- 4. The candidate is advised to select the subject of his/her choice for admission very carefully.

Please Tick (□)													
Applying For: Undergrad	duate Po	stgraduate	M.Phil										
Ph.D	Ot	her											
Program: Morning	Ev	vening											
Applying on: Merit Seat	Reser	rved Seat	Sports Seat										
Department:		Pro	ogram:										
Name (Block Letters)													
Father's Name:													
CNIC /Form-B:													
Nationality:	Domici	le:	Religion	n:									
Gender:	Blood Group:		_ Date of Bir	th:									
Age: Year:	Months: _	Days: _	(as on	closing dat	e of admi	ssions)							
Father's Occupation:		Father's M	onthly Income	::									
Address:													
Tel No. (Res):		Cell No											
(Father/Guardian): Cell	l No.	(Annlicant)	: Email:										

PERSON TO BE CONTACTED IN EMERGENCY: Address: _____ Tel No. (Res):_____ Cell No. _____ University Hostel Other Place Place of stay during studies: Own House **Registration Number: Board: University: ACADEMIC RECORD:** Major Subjects Examination Year Roll No. Division Board / Marks Marks / Grade University Obtained / **Obtained** Maximum in the Marks/ Subject of **CGPA** Admission Matric / O' Level or Equivalent F.A / F.Sc/ ICS D.Com / DBA / A' Level or Equivalent B.A / B.Sc/ B.Com / BBA / A' Level or Equivalent M.A / M.Sc. / M.Com / L.L.B/ Equivalent MS / M.Phil or Equivalent Others Hifz-e-Quran **Distinctions: Co-Curricular Activities** 1. 1. 2. _____ 2. 3.

	3.
CHEC	K LIST:
	Academic Certificate of last examination passed
	Merit Certificate(s)
	Character Certificate from Head of Institution last attended
	Detailed marks certificate of last examination passed
	Hifz-e-Quran Certificate
	National ID Card
	Domicile Certificate.
	One set of attested photocopies of all above mentioned documents.
	Three passport size photographs (duly attested 1 from front and two from back side)
	N.O.C by the last institute/Board attended
LINDE	RTAKING:
I solem	nly affirm that:
1)	I am not a member of any political party and that I shall not indulge in politics as long as I will remain
•	a student of the University.
2)	I will not challenge the findings/decisions of Head of the Institution regarding my
	Rustication/Expulsion from the University or cancellation of my admission at any stage.
3)	I am bound to follow the rules and regulations of the university; otherwise university reserves the
	right to initiate disciplinary action against me
4)	I shall not claim hostel accommodation as a matter of right.
5)	I have myself filled in this Form and the information made herein is correct.
(Sign	nature of the Applicant) (Signature of Father/Guardian)
Datas	Data

FOR OFFICE USE ONLY

Application No	_ Roll. No	_ Registration No
Admission on: Merit Seat	Reserved Seat	Sports Seat
Receiving Clerk:	_ Department's Representativ	e:
Director Students Affairs:	Date:_	

From 2



University of Sahiwal

Sports Based Admission 2020-21 (Year 2020)

Form	No.			

(For Office Use)

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IMPORTANT INSTRUCTIONS:

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Please Tick (☑)																							
Name (block letters)																							
Father's Name:																							
CNIC /Form-B:																							
Address:																							
·					т	el N	lo (Res):														
Cell No. (Father/Guard	lian):													-									
Cell No. (Applicant):						E	mai	l:															
Department & Program	n Ap	plie	d fo	r																			
1			_ 2	2							_ 3												
Game(s) Applied for _								_ \	V ei	ght	Cat	ego	ry _										
Level Played at																					_		
Supporting Document Attached									If not attached then please														
															mention the reason								
															_								
Candidate Signature																	Re	ecei	ved	By:			
											Star	nn:											

From 3



University of Sahiwal

Reserved Seat Based Admission 2020-21 (Year 2020)

Form No.	

(For Office Use)

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- 4. The candidate is advised to select the subject of his/her choice for admission very carefully

Please Tick (☑)																
Name (block letters)																
Father's Name:																
CNIC /Form-B:																
Address:																
			Tel No	(Res):											
Cell No. (Father/Guard	dian):															
Cell No. (Applicant):			Em	ail:												
Department & Program	m Applied f	or														
1		2				3	3	 								
Category of Reserved	Seat Applie	d for: _						 	_							
Supporting Documen	it			Attac	hed			lf r	not a	tta	che	d tl	nen	ple	ase	
									mei	ntio	n t	he ı	reas	son		
Candidate Signature										ı	Rec	eiv	ed I	Ву:		
						Sta	mp:									