

MOHI-UD-DIN ISLAMIC UNIVERSITY NERIAN SHARIF, AJ&K.

EXAMINATION FORM

Semester Spring Fall Year: 200__ Appearing Status: REGULAR RE-APPEAR

Registration No.

Roll No. (if issued)

Programme Name. _____ Part: _____ Code.

Semester. I II III IV V VI VII VIII Annual Supply

Candidate's Name
(in capital letters)

(نام اردو میں)

Father's Name

(ولدیت اردو میں)

Institution. _____ Code.

Exam Centre _____ Code.
(for office use)

Sex. MALE FEMALE Religion MUSLIM NON-MUSLIM Nationality. PAK Other _____

Date of Birth. - - (In words) _____

National Identity Card No.

Postal Address.

Permanent Address.

Current Subjects to be appeared

Subjects	Code	Subjects	Code
1. _____	<input type="text"/>	6. _____	<input type="text"/>
2. _____	<input type="text"/>	7. _____	<input type="text"/>
3. _____	<input type="text"/>	8. _____	<input type="text"/>
4. _____	<input type="text"/>	9. _____	<input type="text"/>
5. _____	<input type="text"/>	10. _____	<input type="text"/>

Re-appearing Subjects failed earlier

Subjects	Code	Subjects	Code
1. _____	<input type="text"/>	4. _____	<input type="text"/>
2. _____	<input type="text"/>	5. _____	<input type="text"/>
3. _____	<input type="text"/>	6. _____	<input type="text"/>

Qualification from other Board/University
Degree / Certificate attached. _____ Year. Roll No.

Declaration. I declare that the particulars given above are correct to the best of my knowledge and belief. I shall be responsible for any wrong information given above. I have attached the required documents.

Signature of Candidate _____

INSTRUCTIONS

PLEASE READ THE FOLLOWING INSTRUCTIONS CAREFULLY BEFORE FILLING THE FORM

1. This Form must be filled in by the candidate legibly and neatly in his/her own handwriting with blue ball point.
2. Candidate and his father's name must be according to Secondary School Certificate.
3. Tick the relevant box like
4. Examination Fee shall be paid/ deposited by the candidate through the Principal/ Director of his/ her college/ Institute for:
a) Semester/ Annual Exam; and
b) Reappearing/ Suppl Subjects
5. Examination Form received incomplete or after due date shall not be accepted/ considered.
6. Each candidate must keep his/ her Roll No. Slip and NIC with him/ her in the examination Hall while taking the examination.
7. While write his name while filling this Form the candidate must ensure that he leaves one box empty between his name i.e. Mohd Alam, must please leave one box empty after Mohd.
8. Overwriting and erasion must be avoided.
9. Candidate appearing in Semester I or Annual 1st Part/Year Exam must submit attested photo copies of their previous Degree/ Certificate.
10. Candidate appearing in Examination (Except Semester-1/ Part-1) must submit attested photo copies of transcript/ result cards of previous Semester/ Part.
11. The Director/ Principal of the Institute / College is requested to ensure correct completion of Form by the candidate before countersigning by him.

CERTIFICATE

I certify that the particulars filled in by the candidate are correct and that he has attended not less them 75% of the lectures.

Candidate photo to be
pasted;
to be attested and
official Stamp affixed
by the Principal

Signature: _____
Principal/ Director

Full Name: _____

Dated: _____

(Stamp of the Principal of College/ Institute)