|  |
| --- |
| FOR OFFICE USE ONLY  Form Checked By.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Roll No. \_\_\_\_\_\_\_\_\_\_\_  Section: \_\_\_\_\_\_\_\_\_\_\_  Challan No. \_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
|  |

SSC Secondary Board SSC Federal Board O-Level

|  |  |  |  |
| --- | --- | --- | --- |
| SSC / O-Level  Roll No |  | Marks Obtained  Lahore/Other Board  Federal Board  O-Level |  |

|  |
| --- |
| **INSTRUCTIONS FOR APPLICANTS**   1. ALL ENTRIES IN THE FORM MUST BE MADE IN BLOCK LETTERS BY THE CANDIDATE IN HER OWN HANDWRITING. 2. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED. 3. ANY CANDIDATE FOUND TO HAVE MADE FALSE OR INCORRECTED STATEMENT IN THIS FORM IS LIABLE TO EXPLUSION. 4. COPIES OF ALL RELEVANT DOCUMENTS MUST BE ATTACHED WITH THE APPLICATION FORM. 5. NO BENEFIT WOULD BE GIVEN FOR ANY DOCUMENT NOT ATTACHED WITH THE APPLICATION OR PRODUCED AFTER THE CLOSING DATE. 6. ONLY ATTESTED COPIES OF THE DOCUMENTS ARE ADMISSIBLE. |

**INFORMATION (BIO-DATA):  
 1. NAME**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |

**2. STUDENTS CNIC/ 3. DATE OF BIRTH   
B. FORM:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**4. FATHER’S NAME:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**5. FATHER’S/MOTHER’S 6. FATHER’S MONTHLY INCOME: \_\_\_\_\_\_\_\_\_\_  
CNIC#:**

**7.FATHER’S OCCUPATION AND OFFICIAL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
8. PERMANENT ADDRESS:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**9. MAILING ADDRESS (IF DIFFERENT FROM ABOVE)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**10. TELEPHONE # (LANDLINE) WITH AREA CODE: ­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 11. MOBILE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**12. NATIONALITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 13. DOMICILE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
14. RELEGION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 15. EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
16. BLOOD GROUP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 17. NAME OF BOARD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ YEAR OF PASSING: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
18. REGISTRARTION NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MARKS OBTAINED \_\_\_\_\_\_\_\_\_\_\_\_ TOTAL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**19. DIV/GRADE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SUBJECTS SSC/O-LEVEL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
20. NAME OF HIGH SCHOOL ATTENDED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**21. DISTRICT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE OF THE APPLICANT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CHECKLIST:** Please check and tick (✓) that you have attached the following attested documents with the Application Form:

|  |  |  |
| --- | --- | --- |
| **Sr. No** | **DESCRIPTION** | **YES** |
| **1** | A Copy of Character Certificate |  |
| **2** | A Copy of NOC (Other than BISE Lahore/Federal) If Applicable |  |
| **3** | 3 Copies of Matriculation Result Card |  |
| **4** | 3 recent passport size photographs with white background (attestation not required) |  |
| **5** | 2 Copies of CNIC or 8 form of Applicant |  |
| **6** | A Copy of CNIC of Applicant’s Father / Guardian |  |
| **7** | Original fee Challan (Admission Processing Fee) |  |

**NOTE:** Hostel facility will not be provided  
 **UNDERTAKING  
1.** I have neither joined nor shall join any other institute during the course of my studies at the University.  
2. I am not suffering from any infection’s disease.  
3. The entries made in this form are correct.  
4. I shall show good behavior  
5. I shall devote wholeheartedly to my studies and maintain the dignity and prestige of the University both in and outside the Campus.  
6. I shall pay in time all dues and fines if any.  
7. I am joining this class with the consent of my father / guardian, who agrees to be responsible for my good conduct and has appended his signature below.  
8. I understand to take examination unconditionally every year as scheduled, subject to any change whatsoever notified by the University.

**SIGNATURE OF FATHER/GUARDIAN SIGNATURE OF THE APPLICANT**

Attach attested photograph of national identity  
card of Father/ Guardian.

DATE: DATE:

**FOR OFFICE USE ONLY  
1. Member\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. Registrar\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3. Fee Incharge \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**------------------------------------------------------------------------------------------------------------------------------------------------  
TO BE FILLED BY THE CANDIDATE**

**Name of applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Daughter of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Subject Selected Group: - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (1). (2). \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
FOR OFFICE USE ONLY**

**Signature of the Dealing Clerk with stamp: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Diary No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**