UNIVERSITY OF GUJRAT

Application Form for Registration Card

Student Name: _____ Father Name: _____

Roll#: _____ Registration No. #: _____

Semester: _____ Degree Status: _____ Department: _____

Campus Name: _____ Program: _____

Studetn CNIC#: _____

Program: ☐ Morning ☐ Evening Dated: _____ Contact No: _____

Subject: _____

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Student Signature:

Required Documents:

1. Fee Challan 100 (Original)
2. CNIC Copy
3. Copy of Metric Degree