

# Registration Form


Course Title:		<div style="border: 1px solid black; padding: 10px; width: fit-content; margin: auto;">                 Paste Recent Colour Photograph             </div>
Student Name:		
CNIC#:		
Postal Address:		
Mobile #:	0 3	Email:
<input type="checkbox"/> The Above information is correct to the best of my knowledge. (incorrect information may result in cancellation of registration)		<input type="checkbox"/> In case of cancellation of registration, the fee will be refunded as per criteria:
		1st week → No Deduction 2nd week → 50% of total fee 3rd week → 25% of total fee 4th week → No Refund.
UIT Roll No. (if any)		Signature: <span style="background-color: #cccccc; display: inline-block; width: 100px; height: 20px;"></span>

## For Office use

Course Code:	Course Title:
1) The entries in the form have been checked and found in order. 2) On the basis of the above information he / she may be recommended for registration.	
CCE Department	

## For Account Office

Course Fee:
Received a Sum of Rs.:
Receipt No.
Account Officer


COURSE TITLE

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Paste Recent  
Colour  
Photograph

Name \_\_\_\_\_  
 CNIC \_\_\_\_\_  
 Reg # \_\_\_\_\_

Issuing Authority

Validity: 2023-2024

UIT University

**Note: Kindly fill this information**

