

CHECK LIST

Please make sure that you have attached the following documents.

Matriculation/O Level Certificate	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Matriculation/O Level Detailed Marks Certificate	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Intermediate/A Level Certificate	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Intermediate/A Level Detailed Marks Certificate	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Bachelor's Degree	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Bachelor's Detailed Marks Certificate	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Master's Degree	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Master's Detailed Marks Certificate	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Any other Degree/Diploma	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Provisional Certificate (For students awaiting results)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
National ID Card/B Form	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Five Recent Photographs (1" x 1")	<input type="checkbox"/> Yes	<input type="checkbox"/> No

SMS NOTIFICATION

I, _____

(Name in block letters)

hereby allow the University of Central Punjab to send me text messages including end-of-semester grades and other important information.

Mobile number: _____

Student's signature: _____

Note: University will ensure that mobile telephone number of the student remains confidential, and will be used by the University only for SMS service.



Application No. _____

5
PHOTOGRAPHS
1" x 1"

APPLICATION FORM

Please complete this form in block letters or type

Faculty of Engineering

Fall Semester

Program Applied for: _____

In case you do not qualify for admission in your choice program, would you like to apply for another program offered at UCP? Yes No

Please state your second option: _____

PERSONAL INFORMATION

Name: _____

Father's Name: _____

NIC/B Form No. - -

Father's Occupation/Designation: _____

Date of Birth: _____

Place of Birth: _____ Religion: _____

Gender: Male Female Nationality: _____

Permanent Address: _____

Present Address: (If different from above) _____

Telephone Numbers: Landline _____ Cell _____ Emergency _____

Email(s) _____

ACADEMIC BACKGROUND AND QUALIFICATIONS (most recent first)

Degree/Award Received	Main Subject(s)	Year	Marks/Grade	Name of Institution

Candidates awaiting results are required to sign the following undertaking:

I undertake to submit attested copy of my Intermediate/A Level/Bachelor's/Master's result to the Registrar's Office as soon as it is declared. If I fail to fulfill the eligibility criteria for admission, University has the right to cancel my admission.

Signature of Applicant

PROFESSIONAL QUALIFICATIONS & WORK EXPERIENCE (Most recent first)

Position	Name of Organization	Dates	
		From	To

OTHER TESTS AND EXAMINATIONS

Test	Test Score	Test Date
GMAT/GRE		
TOEFL		
SAT		
NTS		
Other (Please Specify)		

Specific objectives you wish to achieve by completing the degree in your chosen program

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CO-CURRICULAR ACTIVITIES AND INTERESTS

UNDERTAKING

I declare that:

- a. I have read the Prospectus of the University and understood the contents thereof
- b. The particulars given above are correct. If found otherwise, I will be liable to any action as per policy of the University
- c. If admitted, I will observe the rules and regulations of the University
- d. I will sincerely devote myself to my studies and uphold the dignity and prestige of the University and shall be liable to penalty imposed by the University authorities in case of violation on my part

Signature of Applicant

Date