



Sub-Campus Gomal University, Tank

Convocation Registration Form



STUDENT DETAILS

Department/Program: _____

Student Name: _____ Father Name: _____

Registration Number: _____ Session: _____

Address: _____

Phone Number: _____ Email: _____

Willing to attend convocation: _____

GUEST DETAILS

Guest 1:

Name: _____ CNIC: _____ Relation: _____

Guest 1:

Name: _____ CNIC: _____ Relation: _____

PAYMENT DETAILS OF REGISTRATION

Bank Branch: _____

Amount: _____ Draft Number: _____ Date: _____

DECLARATION BY THE APPLICANT

Certified, that the above statements are true to the best of my knowledge and belief. If the above statement is found incorrect at any stage, I shall make liable for an appropriate disciplinary action by the University Authorities. It is further certified that I have paid the prescribed registration fee of Rs.1,000/- for convocation through:

Receipt Number: _____

Dated: _____

Date: _____

Student Signature: _____