



UNIVERSITY OF GWADAR

KNOWLEDGE | WISDOM | SERVICE

ADMISSION FORM

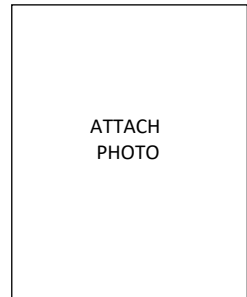
Fall Spring Year

FOR OFFICIAL USE ONLY (NOT TO BE FILLED BY THE CANDIDATE)

Form Serial # _____ Student ID _____

Department Preferences

- MANAGEMENT SCIENCE EDUCATION
 COMMERCE COMPUTER SCIENCE



PERSONAL DETAILS (All students must fill this section)

Gender: Male Female

Name (Block Letters) _____

Student's CNIC # or Form B # (If applicable) _____ Blood Group _____

Father's/Guardian's Name _____ Father's/Guardian's CNIC # _____

Permanent Address _____ Local Area/Town _____

Present Address _____

Email _____ Applicant_Mobile# _____

Date of Birth Guardian Mobile# _____
DAY MONTH YEAR

Domicile _____ Province _____ City _____

Do you have any learning disability? If yes, please specify _____

ACADEMIC RECORD

| Level of Education | Year | Board/ University | Roll# | Reg# | Total Marks | Obtained Marks | Division/ Grade | Major Subjects |
|-------------------------|------|-------------------|-------|------|-------------|----------------|-----------------|----------------|
| Matriculation/ O-Levels | | | | | | | | |
| Intermediate/ A Levels | | | | | | | | |
| Any Diplomas | | | | | | | | |

MDCAT / ECAT -- TEST RESULT

| Reg # | Test Name | Test Date | Validity up to | Total Marks | Marks Obtained |
|-------|-----------|-----------|----------------|-------------|----------------|
| | | | | | |
| | | | | | |

EMERGENCY CONTACT

Emergency Contact Name _____

CNIC #

Relationship to Applicant _____

Address _____

_____ Contact # _____

Are You availing Transportation Yes No

Are You availing Hostel Facility Yes No

DECLARATION AND SIGNATURE

I Mr/Miss/Ms. _____

Son / Daughter of _____ hereby solemnly declare that the information provided on this form is true and correct to the best of my knowledge. I have read and understood all the instructions provided in the current admission form and agree to abide by them.

I also solemnly affirm, declare and undertake that:

- The University reserves the rights to decline the admission form or cancel the admission in case of providing incorrect/fake or incomplete information by the applicant.
- No claim for fee refund will be entertained in case of cancellation of admission. Semester report/transcript of the earned credits shall stand cancelled and non-transferable.
- HEC rules will be followed in case of tuition fee refund. Seeking admission after commencement of classes shall be done on the responsibility of candidate and in case of fee refund the date of commencement of class will be considered according to the University academic calendar.
- The University reserves the rights to cancel or terminate the admission on not meeting the admission criteria of the subject degree program. Therefore, primarily it is the candidate responsibility to submit the result intimation card / transcript of the most recent qualification.
- In case of foreign qualification or in case, where deemed necessary, the equivalence certificate from the Higher Education Commission (HEC) is mandatory for bachelor's degree.
- Applicant will abide by the rules and regulations enforced at University of Gwadar at present and those which may be enforced in the future.

Student's Signature _____

Father's Signature _____

Date _____

Date _____

CHECK LIST

Please encircle the document(s) which is/are missing while submitting the admission form:

| Sr. No | Document | |
|--------|---|--------------------------|
| 1 | 4 Photographs (Name mentioned on back of each picture). | <input type="checkbox"/> |
| 2 | 2 Sets of photocopies of CNIC of applicant, guardian's and local certificate. | <input type="checkbox"/> |
| 3 | Two Sets of photocopies of Mark sheet and certificate of Matric and Intermediate. | <input type="checkbox"/> |
| 4 | Undertaking (duly signed by Oath Commissioner/Naib Tehsildar. | <input type="checkbox"/> |
| 5 | Any other required documents | <input type="checkbox"/> |

I undertake to submit the above mentioned missing (if any) documents to Admission Section as per prescribed timelines.

Student's Name _____ Signature _____ Date _____

FOR OFFICE USE ONLY

| Form Received by | |
|------------------|-----------------|
| Name _____ | Signature _____ |
| Remarks _____ | |