UNIVERSITY OF SWABI

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E-mail: admissions@uoswabi.edu.pk
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ADMISSION FORM (MS / MPhil / MSc (Hons) / PhD)

Session _____ Form No _____

Department ..... Program of Study .....

Name of Student ..... Gender Male ☐ Female ☐

Father's Name .....Domicile .....

Date of Birth __ __ — __ __ — __ __ __ __ Religion ..... Nationality .....

Candidate CNIC _____ E-mail .....

Father's/Guardian's CNIC _____

Father's / Guardian's Occupation..... Contact No .....

Permanent Address .....

.....

Postal Address .....

.....

ACADEMIC QUALIFICATION

Certificate / Degree	Roll No:	Year	Marks Obtained	Total Marks	%age / CGPA	Subjects	Board / University

The above information provided is correct to the best of my knowledge & belief.

Tick one (✓) of the following.

Hostel Needed ☐ Not Needed ☐

Transport Needed ☐ Not Needed ☐ Students Signature_____

FOR OFFICE USE ONLY

Signature of the members of **GSC**

1. 2. 3.

Chairman / HOD

Admission fee paid vide receipt No.....Dated .....