## SHAHEED BENAZIR BHUTTO UNIVERSITY SHERINGAL

## APPLICATION FORM FOR

## DECLARATION OF BELATED RESULTS / ISSUANCE OF WITHHELD / REVISED DMC

2.		e of the applicant_			
	Father's Name:				
3.	Exam	Attended		Year	
	Annu	ual / Supply	Roll No		
4.	Namo or Di	Name of the Institution (if recognized)			
5.	Reasons for withholding Results / DMC:-				
	a.	Amount of fee,	less deposited (now cleared)		
	b.	Amount of late	fee incurred due late submission of form	1	
	c.		eficiency		
	d.		<u>,                                      </u>		
	e.		on(s)		
6.	Date	Date of remittance of fee together with the HBL receipt number			
			to together with the 1222 receipt number.		
7.	D., 11	Admong on with the	iko goutificato eksert d'ha asart		
/•	ruii ë	idaless on which t	the certificate should be sent		
				Signature of Applicant	
			FOR OFFICE USE ONLY		
Rean	iest mav	be granted	Countersigned by	Issued by	
Requ	ıest may	be granted	Countersigned by	Issued by	
Requ	iest may	be granted	Countersigned by	Issued by	
	ing Assi		Countersigned by  ACE / Superintendent	Issued by  Controller of Examinations	
Deali	ing Assi	stant		Controller of Examinations	
Deali	ing Assi	stant	ACE/Superintendent	Controller of Examinations	
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Deali	ing Assi	stant	ACE/Superintendent	Controller of Examinations	
Deali Name R/L, F	ing Assi	Stant  OMC Fee vide HBL re	ACE / Superintendent  ACKNOWLEDGEMENT SLIP Exam Year (A/S) Roll No.	Controller of Examinations  deposited Rs/- athe form has been entered	
Deali Name R/L, F	ing Assi	Stant  OMC Fee vide HBL re	ACE/Superintendent  ACKNOWLEDGEMENT SLIP  Exam Year (A/S) Roll No.	Controller of Examinations  deposited Rs/- athe form has been entered	