Concerning Statement

CONTROLLER OF EXAMINATIONS

SHAHEED BENAZIR BHUTTO UNIVERSITY Sheringal, Dir Upper, Khyber Pakhtunkhwa, Pakistan

## **CLEARANCE CERTIFICATE**

For obtaining Transcript / Degree / Migration				
It is ce	ertified that Roll No:	Registration No:		
NameS/D of				
		Program	Session	
Campus/ Colleges:				
has deposited all his/ her fee/ dues i.e. Admission, Examinations, Hostel etc. till date, and there is nothing outstanding against him/her. (Please Sign and Stamp)				
1:	Head of the Department:			
2:	Hostel Warden:			
3:	Provost:			
4:	Library Section:			
5: 6:	1 0			
7:	Account Section Examination	ation:		
8:	Account Section Receipts	:		
9:	Treasurer:			

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## **Transcript Application Form**

## Note: The following documents are required to be attached with this application.

- a. Provisional Transcript b. Copy of CNIC c. Recent Picture (backside attested)
- d. Previous DMC (F.A/F.Sc for BS Programs, B.A/ B.Sc for Master Programs, M.A/M.Sc for M.Phil....)
- e. Clearances certificate original copy

## 1. Candidate Information:

Name:	Father's Name:	
CNIC No:	Date of Birth:	
Address:		
Degree/ Program:	Mobile Number:	
Roll Number:	Last Examination Year:	
2. Previous Degree Information (Attach	a Copy): (F.A/F.Sc for BS Students and B.A/B.Sc for Master Students)	
Degree Title:	Roll Number:	
Maximum Marks:	_Obtained Marks:	
Board/University:		
3. Fee Detail:		
Transcript Fee Rs: 800/- Bank Branch:	Receipt No:Date:	
Candidate Signature:		
Note: <u>Processing time for transcript is 7</u>	to 15 days.	
4. For Secrecy Section:		
Received Date:	Form Sr. No	
Dispatched to Finance Section:	Received Back:	
Transcript Printed Date:	Sr. No	
Remarks if any:		
	Signature:	

Attach Recent Photograph