UNIVERSITY OF AGRICULTURE, FAISALABAD
GRE (Subject) test
(To be filled in Block letters)

SESSION, 2015-2016

Note: Deposit Rs. 2,000/- (non-refundable)

<table>
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<tr>
<th>Bank draft/Challan #</th>
<th>Bank UAF Branch</th>
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1. Roll No: ............................................................ (assigned by the Office)

2. Subject: ...................................................................................................................

3. Name of Candidate: ...................................................................................................

4. Father’s Name: .............................................................................................................

5. University Regd. No. (if any) ......................................................................................

6. CNIC #: ......................................................................................................................

7. Mailing Address: ........................................................................................................

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8. Telephone No. along with city code/Cell #: .................................................................

(Signature of Applicant)

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UNIVERSITY OF AGRICULTURE, FAISALABAD
GRE (Subject) test
(To be filled in Block letters)

Test date 23-01-2016 Reporting Time 10:30 am

Roll No. ............................................................ (assigned by the Office)

Name of Candidate ...........................................................................................................

Father’s Name ..................................................................................................................

University Regd. No. if any ..............................................................................................

CNIC No. ..........................................................................................................................

Subject: ............................................................................................................................

Signature & Stamp of the Issuing Authority .................................................................

The candidate must follow the instructions given below:

1. Original Roll Number Slip (to be returned before leaving the Examination Hall)
2. Original CNIC or any other proof of identity with photograph
3. Entry into Examination Hall will start at 10:30 am
4. Any kind of helping material and Cell Phones are strictly prohibited in the Examination Hall
5. The candidate is required to sit on the allotted seat according to the issued Roll Number
6. The decision of the Competent Authority on any dispute regarding test shall be final
7. The test will be held on 23-01-2016 at Lecture Theaters 1 & 2 near Faculty of Animal Husbandry at 11:00 am

PHOTO
Attach attested recent 1.5”x 2” photograph

PHOTO
Attach attested recent 1.5”x 2” photograph

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