UNIVERSITY OF AGRICULTURE, FAISALABAD

Form of Application for Registration as Registered Graduate

(For use by a Graduate of the University of Agriculture, Faisalabad /former Punjab Agricultural College and Research Institute Lyallpur /College of Animal Husbandry, Lahore/College of Veterinary Sciences, Lahore)

Name (in Block Letters) _______________________________
Father’s Name _______________________________
University Registered No. _______________________________
Qualification: _______________________________
Address & Telephone No. (Off. & Res.) ____________________
E-mail address: _______________________________

Examination Year of Roll No. Name of University/ College or * Year of
Passing from which appeared in the admission to
Examination. degree.

* Merely passing a Degree Examination does not entitle a person to be enrolled as a Registered Graduate. Admission to a Degree is a necessary condition.

Address at which the ballot is to be sent ____________________________________

The address shall be one at which the applicant normally resides or carries on his work or business; failure to comply with this requirement shall invalidate application.

Date: ___________________ Signature of applicant

Certified that this application has been signed by the applicant in my the presence and that he is personally known to me (or has been identified by ______________________ who is personally known to me).

Dated: __________________ Signature & Seal of attesting Authority**

**The applicant shall fill in the form in his own handwriting and get it attested:
(a) by a Magistrate of the First Class or a Civil Judge or a Subordinate Judge or (b) by the Dean/Director/Principal of the constituent College/Chairman of the University Teaching Department or an Ex-Officio member of the Senate.

Date of remitting the Registration fee of Rs.100.00 Bank Receipt No._________________ Dated: ____________

(TO BE FILLED IN BY THE OFFICE)

Certified that the applicant’s fee of Rs.100.00 was received vide Bank Receipt No.____________ Dated ____________

Accounts Clerk

Certified that the applicant was admitted to the Degree of ________________________________ in the year ________________________

Signature of Clerk

Eligible for Registration Assistant Registrar

Not eligible due to Deputy Registrar