UNIVERSITY OF AGRICULTURE, FAISALABAD.

APPLICATION FORM
GRE (Subject) Type test, For Ph.D. only
Admission Session 2014-2015

1. Deposit of Rs.1500/-

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<th>Bank Branch:</th>
<th>Bank Draft No./Bank Receipt from NBP/HBL, UAF</th>
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2. Faculty ______________________ Subject: ______________________

3. Name ______________________ Regd. #: ______________________

4. Father’s Name ______________________

5. C.N.I.C. ______________________

6. Date of Birth ______________________

7. E-mail address ______________________

8. Gender ______________________

9. Postal Address ______________________

10. Telephone No. ______________________

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<th>CGPA/Marks obtained</th>
<th>University</th>
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<td>Division</td>
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Date: _____________ Signature of the Applicant ______________________

Note: Please do not attach any document other than CNIC copy and Bank Draft/Bank Receipt

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IDENTIFICATION SLIP FOR ENTRY TEST
APPLICATION FORM
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Admission Session 2014-2015

1. Name: ______________________

2. Father’s Name: ______________________

3. Regd. #: ______________________ 4. Faculty: ______________________

5. Subject: ______________________

Director,
Graduate Studies,
University of Agriculture, Faisalabad.

Note: Bring this slip and CNIC in the Examination Hall for identification.