REGISTRATION FORM
THE ISLAMIA UNIVERSITY OF BAHAWALPUR
IUB SPECIAL GAT-GENERAL 2011

1. TEST CENTER
Main Auditorium, Baghdad-ul-Jadeed Campus, IUB

2. NAME in full
______________________________________________________________
(USE CAPITAL LETTERS)

3. FATHER’S NAME
___________________________________________________________
(USE CAPITAL LETTERS)

4. CN.I.C. #
   (New Only)

5. DATE OF BIRTH
   D   D   M   M   Y   Y

6. E-MAIL: ________________________
(Mandatory, most of the future correspondence will be done using e-mail address)

7. Gender
Male  Female

8. CORRESPONDANCE POSTAL ADDRESS
   (All correspondence will be made on this address through postal service)
   _____________________________________________ CITY   ________________ DISTRICT

9. PHONE NO. (OFF) _______________ (RES.) ________________ Mobile ______________
   (City Code-Phone No.)

10. ACADEMIC RECORD

<table>
<thead>
<tr>
<th>Certificate/ Degree</th>
<th>Major Subjects</th>
<th>Marks</th>
<th>Percentage</th>
<th>Board/ University</th>
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<tbody>
<tr>
<td>SSC / Equivalent</td>
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<tr>
<td>HSSC / Equivalent</td>
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<tr>
<td>Bachelors Degree (14 Years)</td>
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<tr>
<td>Masters/ Bachelors (Hons.) (16 Years)</td>
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UNDEARTAKING BY THE APPLICANT
I ________________ d/s/w of ____________________________ do hereby solemnly affirm that the information given in this Registration form is true and correct to the best of my knowledge and belief. I fully understand that my false statement or omission/suppression of any material fact shall render me liable to disciplinary action and/or cancellation of my test.

Date: _______________  Signature of the candidate: _______________