



The Islamia University of Bahawalpur Pakistan

(3) Individuals involved in the incident:

Sr. #	Name	Father Name	CNIC	Department	In case of student(s)				
					Program	Semester	Session	Roll No.	Contact No.
1.									
2.									
3.									
4.									
5.									
Cont..									

(4) Particulars of Witnesses(s):(if any)

Sr. #	Name	Father Name	CNIC	Contact No.	In case of University employee(s)	
					Designation	Department
1.						
2.						
3.						
Cont..						

(5) Particulars of Officer initiating this report:

1. Name:	
2. Designation:	
3. Department:	
4. Source of Information:	
Signature with Stamp:	Date:

Remarks (if any):

Director Students Affairs

Recommended for CIM	Not Recommended for CIM

Vice Chancellor