



NUST COLLEGE OF ELECTRICAL AND MECHANICAL ENGINEERING
APPLICATION FORM – SUMMER SCHOOL
(SUBJECT ADD / DROP)



1. Regn No / CMS ID: _____ 2. Category (GC/PC/ASC/NC): _____
 3. Name: _____ 4. Degree & Syn: _____
 5. Status: (Regular / Deferred) _____ 6. Department: _____
 7. Current Semester: _____ 8. Contact no. _____
 9. Parent's Contact no. _____ 10. Email ID: _____

11. As fol:-

Add

Ser	Subj Code	Title	CH	Grd Obtained	Previous sem

Drop

Ser	Subj Code	Title	CH	Grd Obtained	Previous sem

12. **No of Credit Hrs being increased / decreased)** _____
 (Strikeout whichever is not applicable)
 13. **Balance Amount (Rs.) Payable / Refundable** _____
 (Strikeout whichever is not applicable)
 14. Received a sum of Rs. _____ (in words) _____ from applicant @ Rs. 5000/- per credit hours vide bank challan no. _____ dated _____

15. **Declaration by Applicant.** As fol:-

- a. I hereby declare that in this semester I shall improve a maximum of two courses. If my statement is found incorrect at any stage, the College authority may take any punitive action against the undersigned to which I may be considered liable, I shall have no objection. It is certified that I, the undersigned shall maintain minimum 75% attendance in the course in which I will be enrolled, irrespective of the course Credit Hrs.
- b. I also acknowledge that Fee once submitted is considered as registration against subject and will not be refunded in any case what so ever, in line with NUST policy.

Dated: _____ (Note: After completion form will be handed over to concerned UG coord)

(Applicant's Signatures)

16. Bank Account No for online transfer of balance amount (NBP or HBL only)

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Dated: _____

(Signatures & Stamp)

UG PROGRAM COORDINATOR (DEPT)

17. Certified that detail given at para 11 is in accordance to existing curriculum.

Dated: _____

(Signatures & Stamp)

DEPUTY CONTROLLER (EXAM)

18. Verified.

Dated: _____

(Signatures & Stamp)

ACKNOWLEDGEMENT RECEIPT

CMS ID / Regn No. _____ Name: _____ Dept _____
 Name and signature of receiving Clk _____
 Receiving Date / Time _____

DEPUTY REGISTRAR (UNDERGRADUATES) – ASG

19. Verified.

Dated: _____

(Signatures & Stamp)

20. **Important Instructions.** Sequence of submission of the form will be as follows:-

- a. The applicant will hand over the application form to UG Program Coordinator (Department).
- b. Department will send the application form to Exam Cell for verification.
- c. Exam Cell will forward the all applications forms to concerned department.
- d. On receipt of verified forms from Exam Cell, Department will fwd the same to HQ ASG .
- e. Improvement cases need a week for processing. Therefore, all cases must be forwarded within 1st week of commencement of the semester. Any case later than 1st week, will not be entertained.