

CLEARANCE CERTIFICATE

MS/PhD Students

(by Exam Cell)

CMS ID _____ Name _____ Course no _____

Discp _____ Entry _____ has/her completed following:-

- a. Course work _____ credit hrs with CGPA _____
- b. All original documents pertaining to above mentioned student are held with Exam Cell.
- c. RM-898 / RM-896 Research Methodology Qualified: _____

Student Sig _____

Dated: _____

Deputy Controller Exam

Dated: _____