MUHAMMADNAWAZSHAREEFUNIVERSITYOFAGRICULTURE,MULTAN

COPYFORTHE_____

Enrolment to _____ Semester,_____ Commencing on ___/___/_____ Degree _____

Student's Name _____ Father's Name___ _____

Registered No._____ Date of First Admission_____

STATUS(Please tick the appropriate box)

(a) Regular Student ☐   (b) Govt.Employee(onleave) ☐

(c) University Employee(Academic/Administration)   (d) Employeeofother statutory organizations(onleave) ☐

     i.FullTime(onLeave) ☐   (e) HEC Nominee ☐

     ii.PartTime ☐   (f) Others_____

Dept./Inst._____**Faculty** _____

Credits Completed Semesterwise	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	XIII	XIV	XV

Course Number	Credits	Title of the Course	Major/Minor/ CompulsoryMinor Deficiency/ Audit	Course Included in A.C.W. * Yes/No	Signature of Teacher with name	Rep. If any I, II, III

Course work submitted   **Synopsis Submitted**   **GRE(NTS/ETS)(G/S)**   **MNS-UAM(G/S)**

YES	NO		YES	NO		YES	NO		YES	NO

I shall be responsible for any piece of information misreported on this GS/10 form. I understand that it is subject to cancellation after scrutiny before receiving degree. I shall also abide by rules / regulations regarding GPA/CGPA. In case I receive low GPA/CGPA than the required one my enrolment will be automatically cancelled. I have received student copy of GS/10.Theinformation given above is correct to the best of my knowledge. The teacher(s) must carefully go through the filled in columns of GS/10 forms and other documents for his / her correctness before signing.

Warning: Admission will be cancelled if the CGPA fell below the following i.e .M.A./ M.Sc / MBA/MBA (Exec),M.com / M. Ed degrees 2.00,M.Sc.(Hons) / M. Phil. / MS. 2.75 and Ph. D 3.00 at the end of academic year i.e. winter /spring and the following summer. If a student avail only one regular semester (winter/spring) must obtain GPA of 2.00, 2.75 and 3.00 for M.A/M.Sc /MBA/MBA(Exec),M.com/ M.Ed, M.Sc (Hons) / M. Phill ./M.S. and Ph.D.at the end of summer session of the same academic year to remain on roll.

_____   _____   _____
(Supervisor)   **(Chairman of the Department)**   **Student's Signature**

Fee Paid Stamp_____   _____

IMPORTANTINSTRUCTIONS   **Dean**

1) Cutting/Erasing/Overwriting/Use of fluids not allowed in any case   _____

2) All columns must be filled in properly.   **Director Graduate Studies**   *Indicates Approved Course work