# **ADMISSION FORM**

COURSE NAME	DATE							
PERSONAL	INFOMATIO	ON						
NAME								
FATHER'S/GUARDIAN'S NAME				FATHER'S/GUARDIAN'S CONTACT				
DATE OF BIRTH				PLACE OF BIRTH				
GENDER C	) Male	NATIO	NALITY					
RELIGION			5	STATUS	Sin	gle	Married	
APPLICANT CNIC#.			FATHER	ER'S/GUARDIAN'S CNIC#.				
CONTACT IN	IFOMATION	N						
ADDRESS								
							CITY	
PHONE		MAIL	IL.					
EDUCATION								
LEVEL	LEVEL	TOTAL MARKS	MARKS	S Obt.	DIVISI	ON	BOARD/UNIVERSITY	
MATRIC								
INTERMEDIATE								
GRADUATION								



## AIMS Arid Institute of Management Sciences

#### I DECLARE THAT:

- 1. I HAVE READ THE COLLEGE PROSPECTUS.
- 2. THE PARTICULARS GIVEN ABOVE ARE CORRECT.
- 3. I AM APPLYING FOR ADMISSION WITH THE EXPRESS CONSENT OF MY PARENTS/GUARDIANS.
- 4. IF ADMITTED, I WILL OBSERVE THE RULES AND REGULATIONS OF THE COLLAGE AS WHOLE-TIME STUDENT. IN FORCE AT THE TIME OF JOINING AND WHICH MIGHT BE FRAMED SUBSEQUENTLY.
- 5. I WILL DEVOTE WHOLE HEARTEDLY TO MY STUDIES AND MAINTAIN THE DIGNITY AND PRESTIGE OF THE UNIVERSITY WITHIN AND OUTSIDE THE COLLEGE CAMPUS AND SHALL BE ABLE TO BE HOBBY TO ANY PENALTY INCLUDING RESTRICTION/ EXPULSION, IN VIOLATION OF ANY RULE.
- 6. I WILL NOT LEAVE THE COLLEGE WITHOUT THE WRITING PERMISSION OF THE PRINCIPAL AND SHALL PAY COLLEGE DUES BEFORE LEAVING.
- 7. ALL FEE SHALL BE PAID ON OR BEFORE THE 10TH OF EVERY QUARTER RESPECTIVELY. LATE FEE AS RS.100/ DAY WILL BE CHARGE AFTER DUE DATE.
- 8. FEE ONCE PAID IS NOT REFUNDABLE (ADMISSION REGISTRATION/TUITION FEE) IN ANY CASE.
- 9. THE LIBRARY MEMBERSHIP FEE IS RS.2000/-
- 10. UNIVERSITY REGISTRATION ENROLLMENT AND EXAMINATION FEE SHALL BE PAID BY THE STUDENTS SEPARATELY.

APPLICANT SIGNATURE

### **IMPORTANT REGULATIONS:**

INDIVIDUALS SEEKING ADMISSION ARE REQUIRED TO SUBMIT THE FOLLOWING ALONG WITH THEIR APPLICATION FORM:					
A. FOUR RECENT PHOTOGRAPHS (SIZE1X1 INCH)	E. ORIGINAL NOC (GRADUATE OTHER THAT PUNJAB				
B. ATTESTED PHOTOCOPY OF CNIC.	UNIVERSITY).				
C. ATTESTED COPIES OF RELEVANT DEGREES, DMCS AND	F. ATTESTED COPY OF FATHER/GUARDIAN NIC.				
TRANSCRIPTS.	G. COPY OF DOMICILE				
D. ANY OTHER RELEVANT DOCUMENT.					

#### **APPROVED BY:**

CAREER COUNSELOR	PRINCIPAL	DIRECTOR	