نوط : امیدوارداخلہ فارم پُرکریں اور یونیورسٹی کی ویب سائٹ www.lcwu.edu.pk پرجا کر آن لائن (Online) ایلائی کریں اور پُر کیے ہوئے فارم پر Online Form Submission Code کھھ کرتمام دستاویزات منسلک کر کے جمع کروائیں۔

Online Form Submission Code:



Form No:	

LAHORE COLLEGE FOR WOMEN UNIVERSITY LAHORE

LCWU

درخواست برائے داخلہ پوسٹ گریجویٹ پروگرا م(ایم الیس/ پیانے ڈی)

APPLICATION FOR ADMISSION TO POST GRADUATE PROGRAM (MS/Ph.D) 2019

☐ Fall ☐ Spring

PLEASE AFFIX ATTESTED PHOTOGRAPH 1.5X1.5

TO BE FILLED BY THE OFFICE
ROLL NO رولنبر REGISTRATION NO رجمر پیش نمبر
در نواست گزار نود پر کرے TO BE FILLED BY APPLICANT
APPLICANT'S CNIC NO. / Form B. اُميدوار کا شاختی کار دُنجر اب فارم نجر PREVIOUS REGISTRATION NUMBER, LCWU (If Any)
SECTION-I ADMISSION INFORMATION
Tick one: MS Ph.D Subject MS Ph.D
Subject
ميدان عيش Area of Specialization
NATURE OF ADMISSION (ONLY FOR MS)
Open Merit Disabled Dsports Foreign Other Provinces و يگرصوبه جات خيرمکلي کهيل معذور او پن مير پ
زین معلومات یری الله SECTION-II PERSONAL INFORMATION
APPLICANT'S NAME (in block letters as per SSC) اُميدوارکانام
7.1 1 2 19.11 1 3 19.00 10.10 10 10 10 10 10 10 10 10 10 10 10 10 1
تارىخ يدائش(مىڑك كى سندكى مطابق) DATE OF BIRTH (as per SSC)
DATE OF BIRTH (as per SSC) (تاریخ پیدائش (میڑک کی سند کی مطابق) شهریت شهر ضلع صوب اسال مهینه دن DAY MONTH YEAR PROVINCE DISTRICT/CITY DOMICILE
DAY MONTH YEAR PROVINCE DISTRICT/CITY DOMICILE
RELIGION قوميت NATIONALITY ندبب
FATHER'S NAME والدكانام
FATHER'S CNIC NO والد كاشاختي كار ؤنمبر
والد کا شناختی کار دُنمبر FATHER'S CNIC NO
MOTHER'S NAME والده كانام
MOTHER'S CNIC NO والده كاشناختى كار دفمبر

SECTION –III CONTACT INFORMATION											
PHONE No.(Res) / MOBILE No.											
Applicant's Mob No				Father's Mob No							
اُمیدوارکاموبائل تمبر Dhana Na Basidanaa				والدكامو بأئل نمبر							
	Phone No. Residence				Mother's Mob No						
				ای میل	• //						
	E-mail: ای میل مجر ای الده کاموبائل مجر الده کاموبائل کام										
House #:											
110000 11.											
Tehsil			_ Distri	ct		Province					
Country											
CURRENT	ADDR	RESS (if c	different	from Pe	rmanent A	ddress): (کار	پتے سے الگ	ئرمستنقل	موجوده پېته (ا	
House #:					Street #						
Tehsil			_ Distri	ct			Provir	nce			
Country			<u> </u>								
SECTION -	IV AC	ADEMIC	RECOF	RD						تغلیمی ریکارڈ	
Certificate	Year	Reg. No.	Roll No.	Marks	Div/ Grade	Subje	ec _t ts/ C	Group		ne of Board	
سرشيفيكييك	سال	رجسطر ليشن تمبر	رول تمبر	حاصل کرده نمبر	<i>ڈویژن گریٹر</i>			مضام Sub3*		versity بورڈ/یو نیورسٹی	
Matric						3001	Jubz	Jubs			
میٹرک O-Level											
اوليول	•										
FA/F.Sc ایف اے/ایف ایسی											
A-Level اے لیول											
BA/B.Sc											
(14 Years of Education) بي اكبليات پي اكبليات (چورو بي آت BS											
BS (16 Years of Education)											
MA/M.Sc (16 Years of Education)											
ایم کی ایک ایک ایک ایک ایک ایک ایک ایک ایک											
(18 Years of Education) ایم ایس ایم فل											
SECTION-V DESCRIPTION OF RESEARCH WORK (BS/MSc, MS/ M.Phil)											
TITLE OF THESIS/REPORT SUBJECT		YEAR	INSTITUTION								
				_							
SECTION-V	I DESC	CRIPTIO	N OF P	ROFES	SIONAL E	XPER	IENCE				
JOB TITLE		C	DRGANIZA	I	*GOVT/SEMI GOVT /PRIVATE Fr			DURATION To			
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In case of Govt. / Semi Govt. Please provide No Objection Certificate from the Department. **NO OBJECTION CERTIFICATE** From the Head of the Institution / Organization where currently working. Designation ___ I have no objection if Ms. _applies for __at Lahore College for Women University, Lahore. the admission in MS/PhD in ____ Name of Employer _____ Designation___ Organization ___ Signature with Stamp ____ SECTION-VII PUBLICATION, IF ANY (title of paper, journal, volume, year, page) list of publications may be attached **HOSTEL ACCOMODATION REQUIRED:** باں/ نہیں YES/NO Section-VIII UNDERTAKINGBY THE CANDIDATE 1. In case I am granted admission, I (Name) ------ will not take part in any political activities of any kind. 2. I affirm that I was neither expelled /rusticated by any institution at any time, nor was ever any disciplinary action taken against me. 3. I affirm that if at any stage the documents submitted by me are proved forged, fake, mis-stated or erroneous which affect my merit, I shall be fully responsible and that the university shall be authorized to cancel my admission and take the necessary action against me. 4. I affirm that if I am found guilty of gross misconduct or damage the university property, Vice-Chancellor has the final authority to strike my name off the university rolls. وستخطأ ميدوار Signature of Applicant Section-IX UNDERTAKING BY THE PARENT / GUARDIAN 1. I ------- declare that I will be responsible for the payment of university fees and other dues. I will also be responsible for making up any loss or damages caused by my daughter to the university property. 2. I affirm that the Vice-Chancellor can debar my daughter from appearing in the university Exams for shortage of attendance. 3. I affirm that if the head of the institution calls me at anytime to discuss the conduct and academic carrier of my daughter and if I am unable to contact the university authorities, the Vice-Chancellor reserves every right to decide unilaterally and this decision will be acceptable to me. 4. I concede this authority vested in the Vice-Chancellor to strike my daughter's name off the university rolls as a punishment for the infringement of university rules and discipline printed in the prospectus and amended from time to time. Date ೮,೮: -----وستخطأ ميدوار Signature of Applicant

Docume	nts to be attached جات	مطلوبه دستاوب	
	Attested copy of the interested copy of BS/Equir Attested copy of MA/M.S Attested copy of the Nation Attested copy of the Fation Attested copy of the Dom Character Certificate Migration Certificate (in Compose Certificate of Fation Certificat	c./MS/Equivalent (For candidat onal Identity Card ner's/Guardian's National Identi nicile Certificate case of other University) , provide NOC Certificate from the ner/ Guardian ssport size photographs date: by of Foreign Passport. from the concerned Embass	res applying for Ph.D) ity Card the concerned department)
Note : (i) p	please bring the original ce	rtificates at the time of fee subn	nission.
	Verified by Admission (Verified by Head of the Recommended for adm	Committee Department nission REG LCW	داخله کمینی کی طرف سے تصدیق شدہ ۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔
FATHE	(To be in the solution of the control of the cont	RECEIVING SLIP وصول کرده پر پی Filled in by the candidate) امیدوار خود پر کرے۔ NATURE OF ADMISS	اخلدا يم اليس يا يي النجي ولاى ميدوار كانام الد كانام اخلد كى نوعيت SION:

NOTE: THE CANDIDATE MUST KEEP THIS RECEIPTS/SLIP TO BE PRODUCED AT THE TIME OF INTERVIEW / SPORTS TRIAL.

مهر کے ساتھ دشخط نائب معاملہ کار ------ SIGNATURE OF THE DEALING ASSISTANT WITH STAMP: ------------

NO ENTRY IN THE CAMPUS WILL BE ALLOWED WITHOUT THIS SLIP.