MOHI-UD-DIN ISLAMIC UNIVERSITY NERIAN SHARIF [AJK]

Program Applying For _____

Name: Mr. _____ Father's Name: _____

Date of Birth: Day _____ Month _____ Year _____Marital Status_____

Nationality: _____ NIC#. | | | | | | - | | | | | | | | - | |

Mailing Address: _____

_____

Permanent Address: _____

_____ Mobile#:_____ TEL: _____

Academic Data/ Professional Qualifications

Please list in reverse chronological order all High School, Colleges and Universities Attended

Institution	Year of Passing	Degree	Subject of Study	Division/Grade

Distinctions

Please list Academic or professional distinctions, honors or awards that you received

_____

Recommendations

Please enlist names and addresses of two persons who are personally known to you

Name: _____ _____

Title: _____ _____

Organization: _____ _____

Address: _____ _____

Telephone: _____ _____

Your Relation: _____ _____

I certify that to the best of my knowledge and belief, the information provided in the application form is accurate and complete. I acknowledge that the provision of incorrect information of withholding of relevant information may render my candidature or enrollment liable to cancellation. I undertake to abide by the rules and regulations of the university if admitted.

Signature: _____ Date: _____

For Office use only

Strongly Recommended Recommended with reservation. Not Recommended

_____

_____

_____

Signature: _____ Date: _____