



KOHAT UNIVERSITY OF SCIENCE & TECHNOLOGY
EXAMINATIONS SECTION

Kohat-26000, Khyber Pakhtunkhwa, Pakistan. Ph # 0922-5291501, 0922-52914756

APPLICATION FORM FOR
CHANGE OF SUBJECT IN B.A/B.Sc. EXAMINATION, Year 20____.
(CONDUCT SECTION)

(Particulars to be filled in by the candidate only)

1. Name _____
2. Father's Name _____
3. Name of Examination _____
4. University Registration No. _____
5. Subject already offered as per Examination Admission Form.
 - a) _____ b) _____
 - c) _____ d) _____
6. Subject desired to change:
 - a) _____ To _____
 - b) _____ To _____
7. Appeared last time under Roll No. _____ Year _____
8. Centre of Examination offered in the Examination Admission Form _____

9. Reason of change of subject: _____
10. Remitted Rs. _____ Vide Bank Receipt No. _____

Signature of Candidate _____

Address _____

Dated: ____/____/20____

RULES RELATING TO CHANGE OF SUBJECTS

1. Regular college students are not allowed to change their subjects.
2. Private candidates can change their subject(s) within the allowed combination but not more than two subjects at a time.
3. Late college students are allowed to change their subjects from amongst the allowed combinations on a condition that they will no longer be considered as a late college student and will be treated as a Private Candidate.
4. Candidates appearing in B.Sc. Examination(s) are allowed to change their subjects provided there are no subjects where their practical are involved and that the change subject(s) is/are.
5. If a candidate appears with a change subject not originally offered in the Examination Admission Form his/her paper(s) shall be considered as cancel.

Note: Candidate will be required to apply for change of subjects two months before the commencement of Examination. They will have to pay a sum of Rs. 1000/- per paper. The fee will be permitted in the name of Treasurer, Kohat University of Science and Technology, Kohat.

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Acknowledgement

Received application form for change of subject in B.A/B.Sc. from Mr./Ms. _____

_____ Son/ Daughter of _____

Registration No. _____ Roll No./Enrollment No. _____

On dated _____

Dealing Assistant