



# KOHAT UNIVERSITY OF SCIENCE & TECHNOLOGY

Kohat-26000, Khyber Pakhtunkhwa, Pakistan. Ph # 0922-5291501, 0922-52914656

Name of Dept/College \_\_\_\_\_

For Annual/ Spring/ Fall (Tick Mark Only One) Year \_\_\_\_\_

Program/ Discipline \_\_\_\_\_

(SHALL REACH THE OFFICE OF CONTROLLER OF EXAMINATIONS WITHIN ONE MONTH OF THE DATE OF ADMISSION)

| To be left blank<br>(Registration Number) | S # | Date of<br>Admission in the<br>Dept/ College | Name of Student<br>(As per SSC) | Father Name<br>(As per SSC) | Date of Birth<br>(As per SSC) | Last Examination Passed |      |         | Marks<br>Obtained/<br>CGPA | Division | University /<br>Board from<br>where passed | Remarks/<br>Serial No. of<br>MC attached |
|---|-----|--|---------------------------------|-----------------------------|-------------------------------|-------------------------|------|---------|----------------------------|----------|--|--|
|   |     |  |                                 |                             |                               | Year<br>(A/S)           | Exam | Roll No |                            |          |  |  |
| (1)                                       | (2) | (3)  | (4)                             | (5)                         | (6)                           | (7)                     | (8)  | (9)     | (10)                       | (11)     | (12)                                       | (13)                                     |
|   | 1   |  |                                 |                             |                               |                         |      |         |                            |          |  |  |
|   | 2   |  |                                 |                             |                               |                         |      |         |                            |          |  |  |
|   | 3   |  |                                 |                             |                               |                         |      |         |                            |          |  |  |
|   | 4   |  |                                 |                             |                               |                         |      |         |                            |          |  |  |
|   | 5   |  |                                 |                             |                               |                         |      |         |                            |          |  |  |
|   | 6   |  |                                 |                             |                               |                         |      |         |                            |          |  |  |
|   | 7   |  |                                 |                             |                               |                         |      |         |                            |          |  |  |
|   | 8   |  |                                 |                             |                               |                         |      |         |                            |          |  |  |
|   | 9   |  |                                 |                             |                               |                         |      |         |                            |          |  |  |
|   | 10  |  |                                 |                             |                               |                         |      |         |                            |          |  |  |
|   | 11  |  |                                 |                             |                               |                         |      |         |                            |          |  |  |
|   | 12  |  |                                 |                             |                               |                         |      |         |                            |          |  |  |

(Use More Pages if Needed)

### Please read the following important notes before filling this Performa:

1. Name, Father name and date of birth of the student must be in accordance with the original SSC (Matric) Certificate
2. Name, Parentage and all the particulars of student should be typed.
3. Previously allotted Registration No.s must be mentioned against those students who are already registered with KUST, and copies of the last DMCs shall be attached.
4. Scheduled Fee for each of the student must invariably be accompanied with the Registration Return Proforma.
5. In case of students having passed their lower exams from the Universities of other than Pakistan, an approval of the Registrar of the University must be obtained and authority No. Date may be stated in the Remarks Column. Only the Registration Return will not serve the purpose.
6. Once Registration Return Proforma is submitted, no correction in name/ parentage etc. will be made without scheduled fee (Rs. 100/-) even if the same is due to an oversight or a typographical mistake.
7. Students who have passed their examinations from any other University/ BISE Must attached the original Migration certificate from that concerned institute.
8. Without a Migration Certificate, a Registration No. will not be allotted in any case.
9. Any Other comments can be mentioned in the remarks column.

### Certificate

It is certified that all the entries made above are in accordance with the Gazette supplied by the University/ BISE and the Certificates issued to the students.

\_\_\_\_\_  
Signature: Director/Chairperson/ Principal

Official Stamp