



# DECLARATION

I \_\_\_\_\_ Son/D of \_\_\_\_\_

Hereby solemnly declare that the information given in the fore mentioned spaces are correct. In case of wrong information or concealments of facts, I shall be responsible for the consequence. Further, I undertake to abide by the rules and bylaws of the examination of the University of Chitral.

I deposited Rs ..... Vide Receipt No: ..... Dated ..... in BOK Branch \_\_\_\_\_ . It is further declared that I have taken the required number of classes.

\_\_\_\_\_  
Counter Signature of Head of the  
Department/Institution  
Dated: .....

\_\_\_\_\_  
Signature of the Candidate  
Dated .....

## INSTRUCTIONS

1. The following document must be attached with this form.
  - a. An attested copy of DMC of the last examination.
  - b. Three Attested Passport size recent coloured photographs (for Ist semester fresh students only)
  - c. Bank receipt of Rs. \_\_\_\_\_ as Examination fee.
2. The form must countersigned by the Head of the Department concerned.
3. The form complete in all respect should reach the office of the Controller of Examination on or before the last dates of receipt of the form to be announced by the Controller of Examination.

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## OFFICE USE ONLY

Eligible  In- Eligible  Any Remarks. \_\_\_\_\_

Roll No. Allotted \_\_\_\_\_

Entered by In-Charge Registration: \_\_\_\_\_

Checked by Assistant Controller: \_\_\_\_\_

Confirmed by CE/DCE: \_\_\_\_\_