



**FOUNDATION UNIVERSITY ISLAMABAD  
SIALKOT CAMPUS**

Passport size  
Photo

**APPLICATION FORM FOR ADMISSION**

Form No. FALL 20.....

SPRING 20....

Tick  the programs (s) intend to apply subject to laid down eligibility criteria.

<b>BSSE</b>	<input type="checkbox"/>
<b>BSCS</b>	<input type="checkbox"/>
<b>BBA</b>	<input type="checkbox"/>
<b>BSc(IET)</b>	<input type="checkbox"/>

Please read instructions shown on reverse of the Application Form before filling/completing the same.

1. Applicant's Name: (Write the name as per Matric/Equivalence certificate in hand print in CAPITAL Letters)

2. Applicant's CNIC No.

3. Date of Birth: Day   Month   Year     Male  Female

4. Father's Name: (Write the name as per Matric/Equivalence certificate in hand print in CAPITAL Letters)

5. Father's CNIC No.

6. Mother's CNIC No.

7. Applicant's Blood Group. \_\_\_\_\_ Religion \_\_\_\_\_

8. Father's Profession: (Exact Designation) \_\_\_\_\_ Cell No. \_\_\_\_\_

9. Mother's Profession: (If Applicable) \_\_\_\_\_ Cell No. \_\_\_\_\_

10. Guardian Name (If Applicable) \_\_\_\_\_ Cell No. \_\_\_\_\_

11. Tick (✓) appropriate category Civilian  Govt. Employee

12. Defence Forces FF Employee  Others

Serving  Retired

Rank \_\_\_\_\_

13. Postal Address: \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_ Mobile \_\_\_\_\_

14. Permanent Address \_\_\_\_\_

15. Academic Record.

Examination	Roll No	Year of Passing	Total Marks	Marks Obtained	Percentage (%) Marks/GPA/CGPA	Board/University
Matriculation/ Equivalent						
Intermediate/Equivalent						
Bachelor/ Equivalent						
Master/Equivalent						
MS/M.Phil.						
NTS Result/Score						Not Required

**16. WORK EXPERIENCE**

Job Title	Organization	Address	Duration	Reason For Leaving
			From	
			To	
			From	
			To	
			From	
			To	

**17. HONORS / MEDALS / POSITIONS / SCHOLARSHIPS (availing at present)**

Achievements	Institution / Occasion	Year

**18. EXTRA CURRICULAR ACTIVITIES**


**19. FINANCIAL POSITION**

**Sponsor for your Education.**

Parents       Guardian       Self       Other (specify) \_\_\_\_\_

**Monthly Income of Sponsor.**

Less than Rs. 25000       Rs. 25,000-50,000       Above 50,000

Were you ever removed or expelled from any school/college/institution? \_\_\_\_\_

If yes, give details. \_\_\_\_\_

Indicate if any other disciplinary action was taken against you \_\_\_\_\_

**20. EMERGENCY**

**Person to be Notified in an Emergency**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Contact No. \_\_\_\_\_

Address: \_\_\_\_\_

**21. HOW DID YOU COME TO KNOW ABOUT FOUNDATION UNIVERSITY**

- University Fair/Expo       Newspaper Advertisements       TV/Radio  
 Personal Recommendation       Web/Social Media       SMS       Billboard

## **DECLARATION**

### **22. DECLARATION BY PARENT / GUARDIAN**

This is to certify that my son / daughter / ward named \_\_\_\_\_ is applying for Foundation University degree with my permission and with my full knowledge of the Programs and I undertake to arrange payment of fees and all other dues to Foundation University regularly and without delay. I further undertake to ensure that my son / daughter / ward shall not get involved in politics and other such activities He / She will abide by the rules and regulations of Foundation University Islamabad.

I am responsible for the behavior and conduct of my son/daughter/ward, during his/her stay at the Foundation University Sialkot Campus (FUSC) and shall fully cooperate with the FUSC authorities in this regard as/when/how required by the FUSC. Decision of the University's authority shall be acceptable to me and will not be challenged in any court of law. On change of address, I will intimate this to the University. I am enclosing a signed copy of my CNIC as proof of my undertaking.

**Name of Parent / Guardian** \_\_\_\_\_

**CNIC #** \_\_\_\_\_

**Address** \_\_\_\_\_

**Contact #** \_\_\_\_\_

**Signature of Parent / Guardian** \_\_\_\_\_

**Date** \_\_\_\_\_

### **23. UNDERTAKING (By the Student)**

I undertake to submit attested photocopy of my intermediate/A-Level/DAE/Bachelors/Masters/MPhil result within 3 weeks from the date of admission. If I fail to fulfill the eligibility criteria for admission, the Foundation University has the right to cancel my admission. I have read the prospectus of the University and understood the contents thereof. The particulars given above are correct to the best of my knowledge. If found otherwise, I shall be liable to any action as per policy of the University. I shall sincerely devote myself to my studies and uphold the dignity and prestige of the University. I shall be liable to penalty imposed by the University Authorities in case of violation on my part. I shall abide by all the current rules & regulations, all other rules to be framed time to time by FUSC administration during my whole period of study in FUSC and shall not get involve in politics or other such activities.

**Signature of Parent/Guardian** \_\_\_\_\_

**Signature of Applicant**

## **INSTRUCTION FOR FILLING THE APPLICATION FORM**

Please read and follow these instructions carefully: -

- Fill in the forms in capital letters (Type/Write)
- Avoid over-writing or use of blocking fluids (e.g. Blanco etc.).
- Candidates must write his/her name, father's name, date of birth as given/spelled in their Matric certificate.

### **CHECK LIST**

**I have attached the following Documents.**

**(Original Qualification Certificate be shown at the time of submission of Application)**

- |   |     |
|---|-----|
| a. <b>Attested Photocopy of Matric</b> / Equivalent certificate/Marks sheet   | Y/N |
| b. <b>Attested Photocopy of FA /F.Sc</b> / Equivalent certificate/Marks sheet <b>Part-I result card</b><br>(where applicable) | Y/N |
| c. Hope Certificate: only for result awaiting candidates  | Y/N |
| d. Application form duly affixed with passport size color Photograph.   | Y/N |
| e. Attested Photocopy of NIC or from "B" (if NIC not issued)  | Y/N |
| f. FUI fee deposit slip   | Y/N |




**Please Submit Admission form by Hand/Post Along with all required Documents at:**




**Foundation University Sialkot Campus, Pakki Kotli Daska Road, Sialkot**




### **FOR OFFICIAL USE ONLY**

- |   |  |
|---|--|
| <input type="checkbox"/> SSC/Matric/O-Level/Equivalence | <input type="checkbox"/> HSSC/FA/FSc/DAE/I.Com/ICS/ A-level/IBCC Equivalence |
| <input type="checkbox"/> CNIC/Form B                    | <input type="checkbox"/> FUI fee deposit slip                                |

**Application Received by: \_\_\_\_\_**

<b>Bank Copy</b>	
 <p><b>ASKARI BANK LIMITED, FOUNDATION UNIVERSITY ISLAMABAD, ALSHIFA EYE TRUST HOSPITAL BRANCH, JHELUM ROAD, RAWALPINDI A/C # 181165000031</b></p>	
Challan/CNIC/Form.B#(without space): Issue Date: 23-08-2019 <span style="float: right;">Due Date: <b>13-09-2019</b></span>	
 <b>Foundation University Islamabad</b>	
Student Name:	
Father's Name:	
<b>Form No</b> (Official Use)	
Program:	
Program (Long Name):	
Description	Amount(Rs.)
Admission_Fee	-
Security_Deposit	-
Tuition_Fee	-
Adm Processing Fee (Fall-19)	1500/-
<b>Total</b>	<b>1500/-</b>
<b>Rupees (in words): Fifteen Hundred Rupees Only</b>	
1. Dues are non refundable except Caution Money. 2. There will be no extension of dates and no installment. 3. Registration will be completed on payment of full dues and clearing of pre- requisites. 4. Corrections will not be accepted.	
Admission Status:	
 <b>Foundation University Islamabad</b>	
<b>(Bank use only)</b> Bank Stamp & Signature	

<b>FUI Copy</b>	
 <p><b>ASKARI BANK LIMITED, FOUNDATION UNIVERSITY ISLAMABAD, ALSHIFA EYE TRUST HOSPITAL BRANCH, JHELUM ROAD, RAWALPINDI A/C # 181165000031</b></p>	
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 <b>Foundation University Islamabad</b>	
<b>(Bank use only)</b> Bank Stamp & Signature	

<b>Student Copy</b>	
 <p><b>ASKARI BANK LIMITED, FOUNDATION UNIVERSITY ISLAMABAD, ALSHIFA EYE TRUST HOSPITAL BRANCH, JHELUM ROAD, RAWALPINDI A/C # 181165000031</b></p>	
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