**UNIVERSITY OF ENGINEERING & TECHNOLOGY, PESHAWAR**

**Department of Computer Science and Information Technology**

Tele: - (091) 9222276 Fax No: - (091) 9216663

**Form P (English Proficiency Certificate)**

Name: F/Name:

Registration No: Degree Completion Year

For which Reason the Certificate required:

Remarks (if any)

**Student Sign Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Note:-

1. Student concerned will be responsible for any misinformation provided in this form.

2. Attached Official Transcript.

**(For Office Use Only)**

Diary/ Dispatch No:- Dated

Issued By: Issued Date: