

FORM BSc-2

MNS-UNIVERSITY OF ENGINEERING AND TECHNOLOGY MULTAN

SUMMER SEMESTER/SUBJECT REPETITION REGISTRATION FORM

(To be submitted to Chairman's Office)

Name of Student

Registration Number

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Department: _____

Kindly register me in the following subjects during Summer/Regular Semester _____ (Give year).

Semester	Subject Number/Title	Grade Earned

Challan form (Part 1) No. _____ dated _____ for Rs _____ is attached.

Date: _____

Signature: _____

No. _____

Dated: _____

Approved and forwarded to the Controller of Examinations for further necessary action.

Dated: _____

Chairman _____

(Max. Limits: As per Semester Rules and Regulation)