SUBMISSION DATE:
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## UNIVERSITY OF AGRICULTURE, FAISALABAD

## Directorate of Students Affairs

## **APPLICATION FORM FOR STUDENT IDENTITY CARD**

(Please Write in Block Letters)

REGISTRATION NO	-ag-	N.I.C. NO	
DATE OF ADMISSION		DURATION OF DEGREE	
NAME OF STUDENT			
FATHER'S NAME			
DEPARTMENT / INSTITUTE			
FACULTY		DEGREE	
PHONE NO	C	ELLULAR NO	
BLOOD GROUP	TU	TORIAL GROUP	
SUPERVISOR			
LIBRARY CARD NO		EXPIRY DATE	
BOOK BANK CARD NO		EXPIRY DATE	
HOSTEL NAME		ROOM NO	
HOME ADDRESS			
	CICN		
	SIGNA	ATURES	
TUTOR / SENIOR TUTOR	CHAIRMAN /	DEAN DIRECTOR STUDENTS AF	FAIRS

## **ATTACHMENTS:-**

- 1- One Photo Copy of National Identity Card.
- 2- One Photo Copy of Registration Card.
- 3- One Passport Size Photograph.