



DHA SUFFA UNIVERSITY

Off Khayaban-e-Tufail, Phase-VII (Extension) DHA, Karachi-75500

APPLICATION FOR THE ISSUANCE OF DEGREE

To be filled in by the Applicant

Reg. #: _____ Student's Name: _____ Father's Name: _____

Program: _____ Semester & Year of passing the last (final) examination: _____

Telephone No. (Res): _____ Mob: _____ e-mail: _____

Student's Signature: _____

Instructions for Student :

- Before applying for the Issuance of Degree, please ensure that no liability of any Department, including Fee, Loan, Quarz-e-Hasna (Ihsan Trust) is outstanding against you.
- Degree Issuance Fee may be deposited through Pay Order (in the name of DHA Suffa University) or as specified by the Accounts Office as under:

Fee:

- a. Rs. 4,000 (Convocation Fee) + Rs. 12,000 (Degree Fee) = Rs. 16,000/- (if applied within one year of the issuance of Gazette Notification.)
- b. Rs. 4,000 (Convocation Fee) + Rs. 8,000 (Degree Fee) = Rs. 12,000/- (if applied after one year of the issuance of Gazette Notification.)

Enclose the following documents with this form

- Copy of Final Transcript (S.No. _____).
- Original paid challan of Degree Fee (If paid previously).

FOR OFFICE USE ONLY

Accounts Department

1. Received a sum of Rs. _____ (Rupees _____) for the issuance of Degree.
2. All dues in respect of the above mentioned student are cleared and nothing is outstanding against him/her.

Date: _____ Office Stamp: _____ Manager Finance Signature: _____

Office of Alumni Relations:

It is certified that:

- (i) Alumni survey has been submitted.
- (ii) Other information regarding his employment / employer has been gathered.

Date: _____ Office Stamp: _____ Signature: _____

Registration Department Clearance

1. It is certified that the student has fulfilled all the requirements for issuance of Degree. The Student's name and Father's name in the database have been verified and found correct.
2. Ihsan Trust NOC is attached (where necessary).
3. Recommended and forwarded to the Examinations Department for printing of Degree.

Date: _____ Office Stamp: _____ Registrar's Signature: _____

Examinations Department

Application received from the Registrar Office by (Name): _____ on (date): _____ Sign: _____

Degree prepared by
Examinations Supervisor

Checked by
Asst. Controller of Examinations

Countersigned by
Controller of Examinations

Registration Department

Received from the Examinations Department (Printed Degree) on (date) _____ Received by: _____

