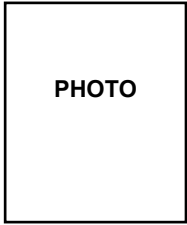


# Shaheen College of Sciences - Karak City



Near Session Court Karak City

92332-9663625

**Admission Form**



Student Name: \_\_\_\_\_

Father Name: \_\_\_\_\_

Father CNIC: \_\_\_\_\_

Date of Birth (In Figures): \_\_\_\_\_

Date of Birth (In Words): \_\_\_\_\_

Gender: \_\_\_\_\_ Parent Email: \_\_\_\_\_

Session: \_\_\_\_\_ Adm Withdrawal No.: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Previous School: \_\_\_\_\_ Family: \_\_\_\_\_

Class of Admission: \_\_\_\_\_ Present Class \_\_\_\_\_

Nationality: \_\_\_\_\_ Religion \_\_\_\_\_

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

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

Registration Date: \_\_\_\_\_

## AFFIDAVIT

I Solemnly declare that the above declaration are true to the best of my knowledge. My ward will abide by the rules and regulation of the school. I further declare that I will clear his/her dues well in time act upon the decision of the institution regarding my ward.

Father's/Guardian's Signature \_\_\_\_\_

**For Office Use Only**

Admission No: \_\_\_\_\_

Name: \_\_\_\_\_ Father Name: \_\_\_\_\_

Class of Admission: \_\_\_\_\_ Date of Admission: \_\_\_\_\_

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

Dealing Clerk: \_\_\_\_\_

Principal: \_\_\_\_\_