**Vocational Training Program**

**ADMISSION FORM (REGULAR SHORT COURSES)**

(ALL WRITING IN CAPITAL LETTERS)

1. Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_(as per Matric Certificate)

2. Father’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_ (as per Matric Certificate)

3. Date of Birth: \_\_\_\_\_ 4. Place of Birth: \_\_\_\_\_\_\_\_\_

5. Religion: \_\_\_\_\_\_\_\_\_ 6. Sect: \_\_\_\_\_\_\_

7. Cast: \_\_\_\_\_\_\_\_\_\_ 8.Brothers\_\_\_ Sisters \_\_\_\_\_\_

9. Father’s / Guardian’s Occupation: \_\_\_\_\_\_\_\_\_\_

10. Father’s/Guardian’s Income: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

11. Guardian’s Name with relation (if applicable):\_\_\_\_\_\_\_\_\_\_\_

12. CNIC: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

13. Domicile (Province): \_\_\_\_\_\_\_\_ Domicile (District): \_\_\_\_\_\_\_\_

14. Permanent Address

Village:\_\_\_\_\_\_\_ Post Office: \_\_\_\_\_\_\_\_\_\_\_

Tehsil:\_\_\_\_\_ District: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PTCL Phone No: \_\_\_\_\_\_ Mobile No (Own):\_\_\_\_\_\_

Mobile No (Father): \_\_\_\_ Mobile No (Any other): \_\_\_\_\_

15. Mailing Address

Village: \_\_\_\_\_\_\_\_\_ Post Office: \_\_\_\_\_\_\_\_\_\_

Tehsil: \_\_\_\_\_\_\_\_\_\_ District: \_\_\_\_\_\_\_\_\_\_\_\_\_

16. Academic Profile

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Level of Education**  | **Year of Passing** | **School / Board/University** | **Total Marks** | **Obtained Marks** | **Percentage /****CGPA** |
| **Middle** |  |  |  |  |  |
| **Matric** |  |  |  |  |  |
| **Inter** |  |  |  |  |  |
| **Bachelor** |  |  |  |  |  |
| **Master** |  |  |  |  |  |
| **Hafiz-e-Quran** |  |  |  |  |  |

17. Hostel. No seats are available for short courses.

18. Declaration by Applicant. I solemnly declare that: -

a. The information provided by me in this form is correct to the best of my knowledge and belief. I shall be deprived of my right of admission if any information is “found incorrect” at any stage in the future.

b. I have carefully read and understood provisions laid down in the prospectus and shall abide by all the rules and regulations which the Institute authorities may prescribe shall be final and binding upon me.

c. I will pay all dues/fees/fines before the due dates, as laid down by the institute.

d. I will not make the administration of the institute responsible for any accident causing injury to me during the period of my stay in the institute.

e. I will not take part in any political, ethnic or sectarian activities or subversive activities against the Institute or Government during my entire period of stay at the Institute. I will be liable to be withdrawn from the institute if I am found involved in any of such activities/discipline matters.

f. I will not ask for a security return if I am terminated by the institution on any disciplinary ground.

g. I will be liable to be withdrawn from the institute, if I do not fulfil any of the above-mentioned declarations (a to f) and decision of the institute in all respects will be accepted by me and will not be challenged in any court of law.

h. Once selected in any choice as applied by me vide para 17 above, I will not request for change in choice at a later stage.

i. If the applicant is unwilling to continue his study in the Institute due to any reason, he will be withdrawn and Rs. 1,000/- will be refunded to him.

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

(Signature of the Applicant)

19. **Declaration by Father / Guardian**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father / Guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

hereby declare that: - (Student Name)

a. I shall not hold the institute responsible for any damage or any accident to my son/ward in or outside the Institute.

b. I shall be responsible for the regular payment of the expenses in connection with the study of my son/ward.

c. I agree to pay any fine imposed on my son/ward.

d. I understand the meanings of the declaration word by word, signed by my son/ward, and understand the repercussions.

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

(Signature of Father / Guardian)

FOR OFFICE USE ONLY

Form No: \_\_\_\_ Received on: \_\_\_\_\_\_ Signature of Recipient \_\_\_\_\_\_\_\_\_