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| UMT.png | **UNIVERSITY OF MANAGEMENT AND TECHNOLOGYSIALKOT CAMPUS** |  |

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**Late Registration Form**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ID No: |  |  |  |  |  |  |  |  |  |  |  |  | Date: | D | D | M | M | Y | Y | Y | Y |
|  |
| Last Name/Surname: |  | First Name: |  | Middle Name: |  |
|  |
| Program: |  | Semester: | Spring 🞏 / Summer 🞏 / Fall 🞏 |  |  |  |  |
|  |
| Total Credit Hours completed: |  | CGPA: |  |
|  |  |  |  |
| Email: |  | Contact No: |  |

**Course(s) to be Registered:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sr No** | **Course Code** | **Cr Hrs** | **Course Title** | **Section** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
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|  | Total: |  |  |  |

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| Reason of Late Registration: |  |
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* Rs. 500/- per day fee is applicable as the late registration charges.
* Concern advisor will register the course after the payment of the late registration charges.

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|  | Student’s Signature: |  |

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*(For Office Use Only)*

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| --- | --- |
| **COD / Area Coordinator / Advisor Name:** |  |
| Approved: | 🞏 Yes | 🞏 No |  | Data Entry: | 🞏 Yes | 🞏 No |
| Signature: |  |  | Date: |  |

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| **UNIVERSITY OF MANAGEMENT AND TECHNOLOGY - SIALKOT CAMPUS** |
| **Acknowledgement Receipt : Registration Form** |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Semester: Spring 🞏 / Summer 🞏 / Fall 🞏 |  |  |  |  |  |  |  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
| Participant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  ID No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
| Name of Advisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  Signature of Advisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |