

# University of Management and Technology

## Clearance Form Progress Report

Student ID #: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Name: \_\_\_\_\_ (Capital letters and as per matric certificate)

Father's Name: \_\_\_\_\_ (Capital letters and as per matric certificate)

Program: \_\_\_\_\_ Total Credit Hours Completed: \_\_\_\_\_ CGPA: \_\_\_\_\_

Email: \_\_\_\_\_ Contact No.: \_\_\_\_\_

CNIC. # 

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Address (Home): \_\_\_\_\_

Address (Office, if applicable): \_\_\_\_\_

Designation: \_\_\_\_\_ Contact No.: \_\_\_\_\_

State Reason for Progress Report: \_\_\_\_\_

Participant's Signature: \_\_\_\_\_

### Departmental Clearances

Name of Department	Location	Signatures	Office Stamp and date
Office of Controller of Examinations (OCE)	1 <sup>st</sup> Floor, Admin Block		
Office of Learning Resource Center (LRC)	Library Building		
Office of Information Processing Center (IPC)	1 <sup>st</sup> floor North Block, Main Building		
Hostel (UMT Hostel Residents only)			
Office of Participant Accounts (OTR)	1 <sup>st</sup> Floor, Admin Block		
Office of Registrar (ORG)	1 <sup>st</sup> Floor, Admin Block		

**Note:** Please attached attested photocopy of Matric Certificate and paid challan of Rs. 1000/-.