



**UNIVERSITY OF EDUCATION**  
**DIVISION OF SCIENCE & TECHNOLOGY, TOWNSHIP, LAHORE**

1. **Application for** (please tick one)

- ☐ Re-Admission   ☐ Course/s Repeat   ☐ Semester Freeze   ☐ Semester Un-Freeze   ☐ Deficiency Courses  
☐ Course Improvement (*Only D Grade Courses can be improved*)

2. **Student Information:**

Name: \_\_\_\_\_ Registration No: \_\_\_\_\_

Roll No: \_\_\_\_\_ Cell Phone No: \_\_\_\_\_ Email ID: \_\_\_\_\_

Department: \_\_\_\_\_ Shift: ☐ Morning   ☐ Evening   Degree Program: \_\_\_\_\_

3. **Semester in which student was failed in semester/course**

Fall \_\_\_\_ Spring \_\_\_\_   ☐ 1<sup>st</sup>   ☐ 2<sup>nd</sup>   ☐ 3<sup>rd</sup>   ☐ 4<sup>th</sup>   ☐ 5<sup>th</sup>   ☐ 6<sup>th</sup>   ☐ 7<sup>th</sup>   ☐ 8<sup>th</sup>   CGPA \_\_\_\_

4. **Semester in which student will repeat:** Fall \_\_\_\_ Spring \_\_\_\_ Summer \_\_\_\_

I hereby declare that all the particulars given above are correct and in case of any difficulty arising out of inaccuracy therein, I shall be responsible for the consequences.

Student Signature & Date

5. **List of Course/s:**

Sr. No.	Course Code	Course Title	Credit Hours	For department Coordinator use Only	
				Offering in current semester	Remarks
1.				<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.				<input type="checkbox"/> Yes <input type="checkbox"/> No	
3.				<input type="checkbox"/> Yes <input type="checkbox"/> No	
4.				<input type="checkbox"/> Yes <input type="checkbox"/> No	
5.				<input type="checkbox"/> Yes <input type="checkbox"/> No	
6.				<input type="checkbox"/> Yes <input type="checkbox"/> No	
7.				<input type="checkbox"/> Yes <input type="checkbox"/> No	

6. **Head of Department recommendation:**

Department/program/shift in which student will be studied

- ☐ Botany   ☐ Chemistry   ☐ Information Sciences   ☐ Mathematics   ☐ Physics   ☐ Zoology

Program: \_\_\_\_\_ Shift: ☐ Morning   ☐ Evening

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. **Incharge Internal Examination:**

\_\_\_\_\_  
\_\_\_\_\_

8. **Director:** \_\_\_\_\_

9. **Fee Information**

Is fee challan issued ☐ Yes ☐ No   *Incase fee challan was issued then challan No.* \_\_\_\_\_