Student ID/Roll Number _____

UNIVERSITY OF EDUCATION, LAHORE

EXAMINATIONS DEPARTMENT

College Road, Township, Lahore
(Phone: 042-99262212-16)

URGENT DEGREE FORM

Note: Provide the relevant information at the specified place (s) and attach the requisite documents. Incomplete form will be rejected.

1. Program: _____ 2. Session: _____

3. Name of Institute: _____

4. UE Registration No: | | | | | | | | | | | | |

5. Name of Candidate: (IN BLOCKLETTERS)

6. Father's Name: (IN BLOCKLETTERS)

Paste & Staple Photograph here

7. CNIC No: | | | | | | - | | | | | | | | - | |

8. Exam Roll Number: _____ 9. Gender: _____

10. CGPA Obtained: **(For Semester System Only)** _____ 11. Marks Obtained: **(For Annual System Only)** _____

12. Present Address (For Correspondence): _____

13. Mobile #: _____

14. Permanent Address: _____

15. E-mail Address: _____ 16. Phone # (withcode): _____

17. Addressed to (Designation and Complete Address of authority to whom the information is to be sent): _____

18. Fee Information

Bank Challan/Demand Draft #	Date	Amount	Name of Bank	Branch

19. Attachments Required:
    a) One Copy of the Academic Transcript
    b) One copy of Computerized National Identity Card
    c) One passport size photograph
    d) Original Fee Deposit Challan of **Rs.3000/- (** Only system generated challan forms will be accepted)

DECLARATION: I hereby declare that the above mentioned particulars are correct and in case of any inaccuracy therein, I shall be responsible for the consequences. I further declare that I have attached the above mentioned documents.

Dated: _____ Signature of the Candidate: _____

Attestation & Recommendation by the Concerned Principal/Director

Name of the Principal/Director _____

NIC number of concerned Principal/Director | | | | | | – | | | | | | | | – | |

Signature & Stamp of the Principal/Director _____

Received By

Name _____ Signature _____ CNIC No. _____