

Bank Copy

Askari Bank

Payable at any branch through FLEXCUBE



Challan Form No. **CNIC**

Due Date: **28 Sep 21**

National University of Modern Languages
Sector, H-9, Islamabad
Telephone : 9265096

Bank Account # 0055148000050

**DIGITAL LEARNING & SKILLS
ENRICHMENT INITIATIVE (DLSEI)**

Applicant Personal Information

Name: _____

S/o-D/o _____

CNIC No. _____

Faculty Member Department: _____

Student Department: _____

Registration No. _____

DESCRIPTION **Amount (in Rs.)**

Please (✓) appropriate box

Registration Fee 4,000.00

Amount due: _____

Accounts Copy

Askari Bank

Payable at any branch through FLEXCUBE



Challan Form No. **CNIC**

Due Date: **28 Sep 21**

National University of Modern Languages
Sector, H-9, Islamabad
Telephone : 9265096

Bank Account # 0055148000050

**DIGITAL LEARNING & SKILLS
ENRICHMENT INITIATIVE (DLSEI)**

Applicant Personal Information

Name: _____

S/o-D/o _____

CNIC No. _____

Faculty Member Department: _____

Student Department: _____

Registration No. _____

DESCRIPTION **Amount (in Rs.)**

Please (✓) appropriate box

Registration Fee 4,000.00

Amount due: _____

Oric Copy

Askari Bank

Payable at any branch through FLEXCUBE



Challan Form No. **CNIC**

Due Date: **28 Sep 21**

National University of Modern Languages
Sector, H-9, Islamabad
Telephone : 9265096

Bank Account # 0055148000050

**DIGITAL LEARNING & SKILLS
ENRICHMENT INITIATIVE (DLSEI)**

Applicant Personal Information

Name: _____

S/o-D/o _____

CNIC No. _____

Faculty Member Department: _____

Student Department: _____

Registration No. _____

DESCRIPTION **Amount (in Rs.)**

Please (✓) appropriate box

Registration Fee 4,000.00

Amount due: _____

Student Copy

Askari Bank

Payable at any branch through FLEXCUBE



Challan Form No. **CNIC**

Due Date: **28 Sep 21**

National University of Modern Languages
Sector, H-9, Islamabad
Telephone : 9265096

Bank Account # 0055148000050

**DIGITAL LEARNING & SKILLS
ENRICHMENT INITIATIVE (DLSEI)**

Applicant Personal Information

Name: _____

S/o-D/o _____

CNIC No. _____

Faculty Member Department: _____

Student Department: _____

Registration No. _____

DESCRIPTION **Amount (in Rs.)**

Please (✓) appropriate box

Registration Fee 4,000.00

Amount due: _____