

**Asst. Director / Dy. Director** 

## NATIONAL UNIVERSITY OF MODERN LANGUAGES 24th CONVOCATION MAY 2025

1x1 photo with blue back ground

## **FOR REGISTRATION**

Name:	(In capital Letters)
Father's Name:	Student CNIC No:
Faculty / Department:	Programme:
Roll No: Session:	Degree Completion Date:
Registration No:	Last Exam Held:
Convocation Fee Challan No:	Dated:
Postal Address:	
	MY OF MA
Mobile No:	_ No of Guests (Parents/Spouse Only):
Name of Guest 1:	1x1 photo with
Father's Name:	blue back ground
CNIC No_	
Present Address	
Mobile No	
Name of Cuart 2:	1x1 photo with
Name of Guest 2:	blue back ground
Father's Name:	
CNIC No	
Present Address Mobile No	
	Signature of Stude
<b>IMPORTANT NOTE:</b> The following documents MUST be attack	uests. 2. Copy of Last Passing Degree / Certificate
To be filled in by the Exam Branch.  Checked by:	Counter Checked by:
Desk Incharge Dated: Verified By:	Superintendent Dated:
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