



AIR UNIVERSITY

(Office of the Registrar)

TRANSCRIPT / DEGREE APPLICATION FORM

To be filled by the candidate in CAPITAL LETTER

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Student Name | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Father Name | | | | | | | | | | | | | | | | Date of Birth | | | | | | | | | | | | | | | |
| Registration No. | | | | | | | | | | | Class | | | | | | | | | | | Section | A <input type="checkbox"/> | B <input type="checkbox"/> | C <input type="checkbox"/> | | | | | | |
| Semester | <input type="checkbox"/> Fall | <input type="checkbox"/> Spring | <input type="checkbox"/> Summer | Year | | | | | | | | | | | <input type="checkbox"/> PAF | <input type="checkbox"/> Non-PAF | E-mail | | | | | | | | | | | | | | |
| Department | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CNIC No. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Contact No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

1. Revised Transcript *

2. Revised Degree ‡

Comments/Reason _____

Student Signature _____

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|------|--|-------|--|------|--|
| | | | | | |
| DATE | | MONTH | | YEAR | |

Required Documents:

IN CASE OF LOSS

- Copy of F.I.R.
- Newspaper Advertisement (Original).
- Photocopy of Documents.
- Fee*.

CORRECTION

- Proof of Correction (Documents).
- N.I.C Copy
- Return of Original Documents.
- Fee*.

* Transcript Rs. 1000/-, Provisional Certificate Rs. 1000/-, Degree Rs. 3000/-

Processing Time:

Transcript and Degree request take 15 days for processing.

For Office Use Only

1. Verify with ID Card
2. Verify from System
3. Issued / Decline

Registration Assistant _____

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|------|--|-------|--|------|--|
| | | | | | |
| DATE | | MONTH | | YEAR | |