



COMSATS Institute of Information Technology, Sahiwal

COMSATS Road, off G.T Road, Sahiwal. Phone: 040-4305001-5, 9200100

Application Form for Admission (Undergraduate Program)

Session (Tick One)

Spring 2017
 Fall 2017

INSTRUCTIONS:

1. Please Complete this form in full. Do not omit any section.
2. Please write in BLOCK LETTERS. Your name and father's name should appear exactly the same as in your Matric Certificate.
3. You are allowed to apply for admission in a maximum of three degree programs for the given list of programs

Please attach
 Passport Size Photograph
 (Attested from the back)

SECTION ONE:(Personal Detail)

Name of Applicant:

Father's Name:

Date of Birth: Gender: Male Female

CNIC / 'B' Form No.:

Self Father Nationality

Marital Status: Single Married Divorced

Religion: Blood Group: Domicile (District):

Current Postal Address:

Telephone: Mobile: E-Mail:

Permanent Address:

Telephone: Mobile: E-Mail:

SECTION TWO:(Program Preference)

Please mark 1, 2 and 3 as per your program preference.

BACHELOR(BS) PROGRAMS:

Bioinformatics Business Administration Accounting & Finance
 Computer Science Telecom & Networking Software Engineering (Non Engg.)
 Electrical Engineering Mechanical Engineering

MASTER PROGRAMS:

MCS MSc. Mathematics BBS (formerly MBA) MBA (Executive)

SECTION THREE (A): Education Detail

Certificate/Degree Major	Subjects	Passing Year	Board/University	Marks Obt.	Max.Marks
SSC/Matric/ O-Level/ Equivalent					
HSSC/A-level/ Equivalent (Part-I)					
HSSC/A-level/ Equivalent (Part-II)					
BA/BSc/B.Com/ Equivalent					

SECTION THREE (B): NTS (NAT) Detail

Date when test taken:	NAT Roll No.	NAT Test Type	NAT Score

Note: Appropriate NAT test with minimum score of 50 obtained within last one year is acceptable for this application.

SECTION FOUR:

Hostel Accommodation Required: Yes No Transport Facility Required: Yes No



COMSATS Institute of Information Technology, Sahiwal

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CANDIDATE'S RECEIPT

Application form for Admission

Date:

Form Serial No: SP 17-

Received By _____

Signature _____

Complete in all respects

Incomplete accepted

Office Stamp

Please attach Demand Draft amounting to Rs.1000/- (from any bank) in favor of COMSATS Sahiwal or submit Cash Rs.1,000/- in Admission Office.

SECTION FIVE: Affidavit

AFFIDAVIT

(For Result Awaiting Candidates only)

I _____ Son/Daughter of _____

Resident of: _____ do solemnly affirm and declare as under:

- That I am the deponent of the undertaking and hence fully conversant with the contents of this undertaking.
- That I have appeared for Examination in the Session, from (Institution/ Board / University) under Roll No..... the result of the same is expected by(Date).
- That I will be able to score at least% marks* as per admission requirements of the COMSATS Institute of Information Technology for the degree program of
- That I will submit the result card / DMC within (07) seven days of declaration of the result of Examination. Failing which, my admission at CIIT in the program I have been provisionally admitted shall stand cancelled at any stage.
- That my provisional admission at COMSATS Institute of Information Technology shall automatically stand cancelled, if I am unable to secure minimum required marks for admission. In that case, CIIT has the right to forfeit the fees deposited, except the refundable Caution Money.

Name Signature CNIC/"B" Form No. Date

Parent's / Guardian's Name Parent's / Guardian's Signature.....

Parent's / Guardian's CNIC # Date

* Please mention the minimum percentage of requisite marks of the program in which you are applying.

SECTION SIX: Undertaking

UNDERTAKING

I hereby solemnly declare that the information provided in this form is true and correct to the best of my knowledge. I have read and understood all the instructions provided in the current prospectus and agree to abide by them. I further undertake that I have sufficient financial resources required for the program of study at COMSATS Institute of Information Technology.

I also solemnly affirm, declare and undertake that:

- I shall abide by the rules and regulations enforced at CIIT at present and those which may be enforced at any time in the future. My admission may be cancelled at any stage if I failed to fulfill the minimum eligibility criteria for the admissions.
- I shall conform strictly to the code of conduct for the students of CIIT.
- I shall at all times show respectful behavior towards managements, faculty and my fellow students.

Name of Applicant: _____ Signature of Applicant _____

Name of Parent/Guardian: _____ Signature of Parent/Guardian: _____

Date: _____

Additional Information

How did you come to know about the admission opportunity in COMSATS Institute of Information Technology?

Newspaper: Banner: Social Network: Friend: Any other: _____
(Please Mention)

Check List:

- Two recent passport size photographs (one attested on front, the other on back).
- Two attested photocopies of your computerized National Identity Card/ Form B.
- Two attested photocopies of all academic certificates / degrees / equivalence certificates / NTS result card.
- Migration Certificate, (if applicable).
- Attested copy of letter of financial support by Funding Agency, (if applicable).
- Any other relevant document (s).

Please Note:

- Merit lists of provisionally selected students will be notified on CIIT Sahiwal Campus' Notice Boards/Website as per the announced schedule.
- For more detail, you may visit www.ciitsahiwal.edu.pk

(CIIT is at **No. 1** in CS & IT Category and **No. 2** in Research Productivity as per HEC Ranking)



COMSATS institute of Information Technology, Sahiwal
(Commission on Science & Technology for Sustainable Development in the South)

Bank Copy

Branch Code:

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 Date:

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Branch Name:

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ONLINE DEPOSIT SLIP
(Please deposit in any branch of HPL in Pakistan)

	Remot Branch:	COMSATS Sahiwal
	A/C Title:	CIIT Receipt
	A/C No.	2360-70000008-03

Note: Bank Service Charges (Free of Cost)

Note:

- * Desired Bank Stamp is Required on the Deposit Slip.
- * Send Original Deposit Slip (CIIT Copy) along Application Form to Admission Office, CIIT Sahiwal.
- * Application Form will not be entertained without Original Deposit Slip (CIIT Copy).

Applicant's Name:

Father Name:

CNIC/B Form No:

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Admission Form No:
Applicant's Phone No:

Program: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>																								

Amount Rs: **1000/-** Amount in word: Rs. **One Thousand Rupees Only**
(This amount is non-refundable and non-transferable)

Applicant Signature

Cashier

Officer



COMSATS institute of Information Technology, Sahiwal
(Commission on Science & Technology for Sustainable Development in the South)

CIIT Copy

Branch Code:

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 Date:

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Branch Name:

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