



LAHORE LEADS UNIVERSITY

Sr: _____

Application for Admission

- Fall Spring
 Morning Noon Weekend

Attach
2
Passport Size
Photographs

Program Title _____ Registration No. _____

Personal Details

Name (in capital letters as per Matric / O-Level Certificate) _____

Father's Name (in capital letters as per Matric / O-Level Certificate) _____

Date of Birth (dd/mm/yyyy) ____ / ____ / ____ Gender Male Female CNIC No. _____

Place of Birth _____ Nationality _____ Religion _____ Blood Group _____

Address _____

City/Town _____ Tehsil _____ District _____

Contact Numbers (Cell/PTCL) _____ Guardian's Contact Number _____

Email _____

Academic Qualifications

Program/Degree	Board/University	Passing Year	Subjects	Total Marks	Marks Obtained	Grade / Division/CGPA

Candidates Awaiting Results are Required to Sign the Following Undertaking:

I undertake to submit attested copies of my Intermediate/A Level/Bachelor's/Master's result to the Registrar's Office as soon as it is declared. If I fail to fulfill the eligibility criteria for admission, the University has the right to cancel my admission, without any refund of dues already deposited by me (excepting security deposits if any).

Signatures of the Applicant _____

Medium of Instruction at Intermediate / Terminal Degree Level?

English

Urdu

How did you come to know about Lahore Leads University?

Please check your source of information about LEADS University.

LEADS University Prospectus / Brochures

Ad / Supplement in Newspapers

LEADS University Website

Friends / Relatives

Alumni

Educational Expo

LEADS University Events / Seminars / Orientations Others (please specify) _____

Undertaking

I undertak that:

1. The information provided in this application is correct and true.
2. I shall abide by all rules and regulations of the University.
3. I shall cooperate with the University in its efforts to impart learning.
4. In case of an offer of admission on provisional basis, the offer shall stand frozen if the requirements outlined in the offer are not met by me within the specified period.

Applicant's Signatures _____ Date _____

Student's Registration Details

Please provide the following information:

To be Filled in by the Candidate

NAME (*Capital Letters*):

PROGRAM:

For Office Use Only

ROLL #:

SESSION:

PASTE PASSPORT
SIZE PHOTOGRAPH

Candidate's Signatures

