

**Degree Supplement Information Form (DSIF) (On Non-Judicial Stamp Paper of 20Rs.)**

It is solemnly declared and affirmed that Mr./Ms \_\_\_\_\_ S/DW/O \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 \_\_\_\_\_ CNIC No. \_\_\_\_\_ (copy attached here with) has the following educational credentials starting from matric/equivalent certificate onwards till the completion/award of terminal degree as:

| Title Of Certificate / Degree | Name on Certificate/Degree | Exact Date of Enrollment | Exact Date of Completion | Registration Number | Transcript Number | Degree Number | Awarding Body | College / Institution Location | Copy of the documents found in University/Institute record & Attached |
|-------------------------------|----------------------------|--------------------------|--------------------------|---------------------|-------------------|---------------|---------------|--------------------------------|---|
| Matric/SSC/Equivalent         |                            |                          |                          |                     |                   |               |               |                                | YES <input type="checkbox"/><br>NO <input type="checkbox"/>           |
| Intermediate/HSSC/Equivalent  |                            |                          |                          |                     |                   |               |               |                                | YES <input type="checkbox"/><br>NO <input type="checkbox"/>           |
| Bachelor's degree/Equivalent  |                            |                          |                          |                     |                   |               |               |                                | YES <input type="checkbox"/><br>NO <input type="checkbox"/>           |
| Master's degree/Equivalent    |                            |                          |                          |                     |                   |               |               |                                | YES <input type="checkbox"/><br>NO <input type="checkbox"/>           |
| MS/M.Phil.degree/Equivalent   |                            |                          |                          |                     |                   |               |               |                                | YES <input type="checkbox"/><br>NO <input type="checkbox"/>           |
| Doctrate                      |                            |                          |                          |                     |                   |               |               |                                | YES <input type="checkbox"/><br>NO <input type="checkbox"/>           |
|                               |                            |                          |                          |                     |                   |               |               |                                | YES <input type="checkbox"/><br>NO <input type="checkbox"/>           |

**Note:** As per University/Institute record, the details mentioned above are correct and pertains to the same person. Moreover, the authenticity of above document is the sole responsibility of the University/Institute and the applicant himself/herself. I also solemnly declare and affirm that above information is correct to the best of ,my knowledge /record and nothing has been concealed therefrom. In case the above information is found to be incorrect,appropriate proceedings may be initiated against me and the University/Institute. **Admission/Registration form, Award List/ Result Statement, Tabulation Sheets/Student Information System and Gazette Notifications Result Announcement** of the above mentioned graduate are

**Verified by :**

Name \_\_\_\_\_

Designation : Controller Examination

Signature & Official Stamp

**Signature of the Applicant**

Date : \_\_\_\_\_

**Counter verified by:**

Name \_\_\_\_\_

Designation: Rector

Signature & Official Stamp \_\_\_\_\_