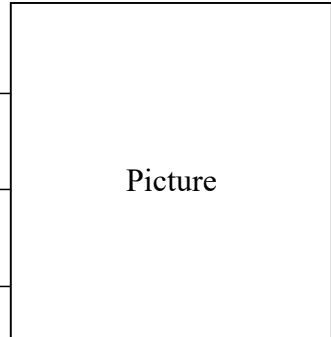


REGISTRATION OF PH.D IN
MECHATRONICS ENGINEERING

Name: _____

Father's Name: _____

Address: _____



Permanent Address: _____

Contact No: Office: _____ Personal: _____

E-mail Address: _____

Name & Address of Supervisor: _____

Documents Attached:

i) Copy of CNIC

ii) Copy of DMC

iii) Fee Bank Challan

Date: _____ Signature: _____

Registration No: _____