



# COMSATS University Islamabad Lahore Campus

## Semester Result Card Request Form

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

Registration Number: \_\_\_\_\_ Current Semester: \_\_\_\_\_

Name: \_\_\_\_\_ Father Name: \_\_\_\_\_

**Degree Program (Please ✓ tick at your degree program):**

Electrical Engineering	Management Sciences	Computer Science	Chemical Engineering	Physics, Humanities, Mathematics	Architect & Design
<input type="checkbox"/> BSTE <input type="checkbox"/> BSCE <input type="checkbox"/> BSEE <input type="checkbox"/> MSTE <input type="checkbox"/> MSEE <input type="checkbox"/> PhD-EE <input type="checkbox"/> Any Other	<input type="checkbox"/> BSBA <input type="checkbox"/> BSAF <input type="checkbox"/> BSECO <input type="checkbox"/> BBS <input type="checkbox"/> MBA (1.5 year) <input type="checkbox"/> MBA (02 year) <input type="checkbox"/> MBA (03 year) <input type="checkbox"/> MBA (3.5 year) <input type="checkbox"/> MSMS <input type="checkbox"/> MSECO <input type="checkbox"/> MSPM <input type="checkbox"/> MSSM <input type="checkbox"/> PhD-MS <input type="checkbox"/> Any Other	<input type="checkbox"/> BSCS <input type="checkbox"/> BSSE <input type="checkbox"/> MSCS <input type="checkbox"/> PhD-CS <input type="checkbox"/> Any Other	<input type="checkbox"/> BSEC <input type="checkbox"/> MS-Chem <input type="checkbox"/> PhD-Chem <input type="checkbox"/> Any Other	<input type="checkbox"/> BPH <input type="checkbox"/> BPSY <input type="checkbox"/> BSM <input type="checkbox"/> MSENG <input type="checkbox"/> MSMATH <input type="checkbox"/> MSPHY <input type="checkbox"/> MSSTAT <input type="checkbox"/> PhD-PHY <input type="checkbox"/> PhD-MATH <input type="checkbox"/> PhD-STAT <input type="checkbox"/> Any Other	<input type="checkbox"/> BAR <input type="checkbox"/> BDE <input type="checkbox"/> BFA <input type="checkbox"/> Any Other

**Result required for the Period from Semester \_\_\_\_\_ to Semester \_\_\_\_\_**

Reason for applying:

\_\_\_\_\_  
\_\_\_\_\_

Kindly attach Original Copy of Bank Voucher as per following detail:

- Urgent (Fee Rs. 1000/- per semester within 01 day)
- Normal (Fee Rs. 500/- per semester within 05 days)

Student Cell #: \_\_\_\_\_

Student Signature: \_\_\_\_\_

### For Examinations Office Only

Diary In. #: \_\_\_\_\_ Date: \_\_\_\_\_ Paid Voucher Attached  Yes  No

Received by: \_\_\_\_\_ Marked to: \_\_\_\_\_

Prepared by: \_\_\_\_\_ Result Card Issuance. # \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_