



# WOMEN UNIVERSITY SWABI

Khyber Pakhtunkhwa-Pakistan

Website: [www.wus.edu.pk](http://www.wus.edu.pk), Phone No: 0938-224222

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Please Affix Recent  
Passport size  
Photographs

## ADMISSION FORM

BS (4-years) / BBA (Hons) / LLB (5 Years) Programs

**Fall Semester-2022**

1. **APPLYING FOR PROGRAM: (please tick any one):**

- BS Programs  BBA  
 BS 5<sup>th</sup> Semester  LLB

Department: \_\_\_\_\_

2. **Seeking admissions on (please tick any one):**

- Open merit  Sports  Hafiz Quran

**Reserved Seat (please tick any one):**

- Newly merged districts of KPK (FATA)  Balochistan  Overseas Pakistani  
 Afghan National  Disable  Minority  Gilgit Baltistan

3. **Personal Information:**

Name of applicant (in Block Letters): \_\_\_\_\_  
As per Secondary School Certificate (SSC)

Father's Name (in Block Letters): \_\_\_\_\_  
As per Secondary School Certificate (SSC)

Applicant's CNIC Number: (or Form 'B' must be attached): \_\_\_\_\_

Father's CNIC Number: (Photocopy of CNIC must be attached): \_\_\_\_\_

Date of Birth: (as per Secondary School Certificate (SSC) ): \_\_\_\_\_

Religion: \_\_\_\_\_ Nationality: \_\_\_\_\_

Blood Group: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Nationality other than Pakistani (if any): \_\_\_\_\_

Passport Number (for foreign nationals (attach a copy): \_\_\_\_\_

Visa Validity dates and NOC (attach copies): From: \_\_\_\_\_ to: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Domicile: \_\_\_\_\_ Province: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone/Mobile: \_\_\_\_\_

**Emergency Contact Number, parents or guardian (Mandatory):**

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

Telephone/Mobile: \_\_\_\_\_

**4. ACADEMIC RECORD**

S#	Examination Passed	Academic Year	Annual/ Supply	Obtained Marks	Total Marks	Division/ CGPA	Board/ University
1	SSC or equivalent						
2	HSSC (FA/FSc.) A level/ OLevel						
3	ADE/ BS (4 Semester)*						

\*Students have to provide BS 4 Semester Transcript at the time of admission in case of migration.

Institute Last Attended: \_\_\_\_\_

Board/University Registration No: \_\_\_\_\_

**Details of siblings (already enrolled in Women University Swabi)**

S.No.	Name	Semester (Current)	Department
1.			
2.			

Do you want Transport Facility? \_\_\_\_\_

If Yes then your Routes to University: \_\_\_\_\_

**Declaration:**

I solemnly declare that all the entries made in the admission form are correct to the best of my knowledge and belief and also according to the academic credentials and nothing has been kept concealed. I shall abide by the rules and regulations made and notified by the University from time to time.

I also declare that in case of any documents provided found forged/ fake at any stage, my admission shall stand as cancelled with immediate effect.

**Signature of the Applicant:** \_\_\_\_\_ **Signature of Father/Guardian:** \_\_\_\_\_

**Dated:** \_\_\_\_\_

## For Office Use Only

### 1. Provisional Admission approved on (Please tick anyone):

Open merit                       Sports                       Hafiz Quran

#### Reserved Seat (please tick anyone):

Newly merged districts of KPK (FATA)                       Balochistan                       Overseas Pakistani  
 Afghan National                       Disable                       Minority                       Gilgit Baltistan

**In Department:** \_\_\_\_\_

#### Departmental Admissions committee:

HoD/ Chairperson (Name):	Signature with Date:
Senior Faculty Member (Name):	Signature with Date:
Senior Faculty Member (Name):	Signature with Date:
Senior Faculty Member (Name):	Signature with Date:

### 2. Admission Section

Date of Admission: \_\_\_\_\_ Session: \_\_\_\_\_

Semester: \_\_\_\_\_ Program of Study \_\_\_\_\_

Department: \_\_\_\_\_ Faculty: \_\_\_\_\_

Enrollment No: \_\_\_\_\_ Registration No: \_\_\_\_\_

Assigned Dealing Assistant (Name):	Office Assistant (Name):
Signature with Date:	Signature with Date:

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

\_\_\_\_\_  
*Deputy Director Admissions*

\_\_\_\_\_  
*Incharge Admission Section  
Women University Swabi*