



UNIVERSITY OF KAMALIA

OFFICE OF THE CONTROLLER OF EXAMINATIONS

Phone No. 046-3411194
Email: exam.office@ukm.edu.pk

Summer Semester Registration Form

Note:- Students who have obtained grades (F, D, or C) are eligible to register only for the courses offered by their respective department. This registration form is applicable for repeating up to two courses (maximum 06 credit hours) only. The fee for repeated courses is Rs. 2,000 per credit hour.

1. Name of Student: _____
2. Father's Name: _____
3. Program Title: _____
4. Department: _____
5. Session: _____ 6. Semester: _____ 7. Shift (Morning/ Evening)
8. Registration No. _____ 9. Roll No. _____
10. Contact No: _____
11. **Course 1:**

- a) Semester: _____ Grade: _____
- b) Course Title: _____
- c) Credit Hour: _____
- d) Course Code: _____

12. **Course 2:**

- a) Semester: _____ Grade: _____
- b) Course Title: _____
- c) Credit Hour: _____
- d) Course Code: _____

Signature of Student