

UNIVERSITY OF HEALTH SCIENCES, LAHORE Khayaban-e-Jamia Punjab, Lahore. Ph. 042-9231304-10, Fax: +92-042-99231857

Application for Student Bonafide Letter

Please Tick	
Normal	
02 WEEKS	
(Fee Rs.2000)	
Urgent	
01 WEEK	
(Fee Rs.4000)	

Paste Attested **Photograph**

<u>Instructions:</u>	Here	
Fill the form in capital letters.		
Regular Attendance & Study Letter having date of commencement & dissigned & stamped by the principal of respective college.	ate of graduation duly	
☐ One (01) attested photograph of Candidate & Copy of CNIC / Passport		
Attach the original DD/ P.O/ Bank Challan (Normal fee: Rs.2000/- Urg		
One (01) attested photocopy of Degree (If Issued / Applicable)	,	
■ Detail Marks Certificates of Profs (If Course is Ongoing)		
☐ An Application to Registrar-UHS containing the purpose of attaining the	e bonafide letter	
1. Course/ Degree:		
(Subject name in case of postgraduate)		
2. Name of Candidate:		
3. Father's Name:		
4. UHS Registration No.		
Y E A R - - R E G # - U H S		
5. Date of Birth: 7. CNIC #		
8. Postal Address:		
9. Phone / Cell No. (For Correspondence) 10. Session		
11 PMDC # 12.Class Starting Date		
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11. DD. / P.O. #/ Bank Name:		
11. DD. 71.O. #/ Dank Name.		
Name of Principal:		
Signature of Candidate: Date: Date:	•••	
Verified By: Principal (Constituent / Affiliated Institute):		
Examination Department - UHS:		
Incharge Degree Cell:		