

# **THE UNIVERSITY OF HEALTH SCIENCES**



**Final Register of Registered Graduates**

## **REGULATIONS RELATING TO REGISTRATION OF STUDENTS**

1. The Principal / Dean of every affiliated college shall submit to the Registrar within **Fifteen days**, the Registration Return i.e. list of students admitted, alongwith Enrollment / Registration Fee of Rs.1,200/- per student.
2. The College is liable to pay fine at prescribed rates if the Registration Return is not submitted within due date.  
After the lapse of **Thirty Days** from the last date of admission, no return will be accepted under any circumstances.
3. On admission to an affiliated college, every student shall be required to pay a registration fee as per Fee Schedule to the University through the Principal.
4. In case of a student migrating from any other University/Board Migration/Transfer certificate and the Certificate/Degree of the last examination passed by the student should also be submitted alongwith this form for confirming admission of such a student.
5. If any student is struck off the rolls of a college, migrates to another college, rusticated or expelled, such fact shall be immediately reported to the Registrar.
6. In case of a registered student joining or rejoining a college, the Principal shall quote such student's Registered Number and also remit his University Sport Fee as required.
7. The University Sports Fee shall be realized annually **@ Rs. 50/-** from the students of the Degree and Postgraduate Classes for their respective Courses at the time of their admission to affiliated college.



## THE UNIVERSITY OF HEALTH SCIENCES, LAHORE

**University Registration Return 200\_\_**      **College:** \_\_\_\_\_      **City:** \_\_\_\_\_      **Class:** \_\_\_\_\_  
*(To reach the Registrar Office within fifteen days after the date of admission).*

To be left Blank for Registered Number	First Entry to the College (Date & Year)	Class Roll No.	Name & NIC Number	Father's Name & NIC Number	Date of Birth	Examinations Passed		University Scholarships, Medals, Prizes	Registered Number assigned by the Board of Intermediate & Secondary Education	If migrating from other Board / University, Name of the Board / University with remarks, if any	I.D. Card Size Photograph of the candidate with sky blue background	Remarks		
						Matriculation, Intermediate etc. / Graduation MBBS, BDS etc. / Postgraduation M.Phil etc.								
1	2	3	4	5	6	Year	Roll No.	7	8	9	10	11	12	13

**Certificate:-** Certified that the name, father's name, date of birth, Roll No. and the Registered Number (if any) of each student noted in the Return are in accordance with the name and Regd. No. as entered in the University / Board Gazette.

**Dated:** .....200.....

**Note:-** A Separate form should be used for each class.

Principal / Dean .....  
 .....College / Institution