



KHYBER MEDICAL UNIVERSITY, PESHAWAR
Application Form for Award of Degree

Paste Recent Coloured Photograph

University Registration No: [ ]
Title of Degree: [ ]

- 1. Name (In block letters).....
2. Father's Name (In block letters).....
3. Name of Examination passed ..... Roll No. ....
Year/Session..... Annual/Supply.....
4. Institution attended: .....
5. Permanent address: .....
Phone No.....
6. C. N.I.C.NO .....

I have completed all the requirements for award of degree and have deposited Rs..... in
.....vide Bank Receipt No.....dated.....
(Attached original Bank Receipt)

(Head of Institute/Principal/Vice Principal)

Signature \_\_\_\_\_
Name \_\_\_\_\_
Office Seal \_\_\_\_\_

Signature of the Candidate

Entries Checked by FOR OFFICE USE ONLY
S.I.E ACE DCE

Controller of Examinations

ACKNOWLEDGEMENT

Received the degree application form of Mr/Miss.....
S/D/O.....Reg.No.....
Session..... Annual/Supply Roll No..... Fee deposited Rs. .... in .....
vide Bank Receipt No .....Dated .....

Note: The applicant must produce his/her original CNIC at the time of collection of degree.

IMPORTANT NOTE:
The applicant must read the instructions on
the reverse of the application form carefully
before submitting the form in the office.

Section Incharge
(Degree & Registration)
Examination Department

## INSTRUCTIONS FOR THE STUDENTS

### A. For Original Degree (Requirements)

- i. Form must be signed and duly stamped from the concerned Principal/Head of Institution.
- ii. Copy of DMC/Transcript of the last passed Examination.
- iii. Copy of CNIC.
- iv. Passport size Colored Photograph.
- v. Original Bank Receipt (Fee receipt can be downloaded /printed from KMU website [www.kmu.edu.pk](http://www.kmu.edu.pk) and submit it any MCB branch).
- vi. Account No. 0977029551007356

### B. For Duplicate Degree (Requirements)

- i. Copy of Original Degree (if available).
  - ii. Copy of DMC/Transcript of the last passed Examination.
  - iii. Cutting of any national newspaper (in original) to show the where the missing report of the degree/document is published.
  - iv. **Roznamcha**/Missing Report (in original) from the concerned police station.
  - v. Copy of CNIC.
  - vi. Affidavit (in original) mentioning the details of the missing degree/documents.
  - vii. Original Bank Receipt (Fee receipt can be downloaded /printed from KMU website [www.kmu.edu.pk](http://www.kmu.edu.pk) and submit it any MCB branch).
  - viii. Account No. 0977029551007356
- ❖ This office will not be held responsible for delay in preparation of degree beyond the stipulated period of time due to unavoidable circumstances.
  - ❖ The applicant must submit the prescribed form, completed in all respect, in official timing to the degree section KMU.
  - ❖ In case of short coming /correction in particulars the date of application form shall be counted from when the objection is rectified.
  - ❖ **The applicant must produce his/her original CNIC at the time of collection of degree.**

#### Fee Schedule

| Category         | Issuance Period | Original Degree | Duplicate Degree | Urgent Degree |
|------------------|-----------------|-----------------|------------------|---------------|
| Degree Fee       | 25 working days | Rs. 3500/-      | Rs. 3500/-       | 5000/-        |
| Verification Fee | 7 working days  | Rs. 1000/-      | Rs. 1000/-       | 1000/-        |



**Khyber Medical University  
Affiliated Inst/Colleges Fee Slip**

MCB Bank Limited



Account No  
**0977029551007356**  
(Bank Copy)

Date \_\_\_\_\_

**INSTITUTIONAL DEPOSITS**

Inst/ College Name \_\_\_\_\_

Purpose of Deposit \_\_\_\_\_

Semester/Year \_\_\_\_\_

No. of Students \_\_\_\_\_ Rate \_\_\_\_\_

Contact No. \_\_\_\_\_

Cheque/Draft# \_\_\_\_\_

**STUDENT'S/INDIVIDUAL DEPOSITS**

Name \_\_\_\_\_

Father's Name \_\_\_\_\_

Institute \_\_\_\_\_

Registration No. \_\_\_\_\_

Purpose of Deposit \_\_\_\_\_

Semester/ Year \_\_\_\_\_

Contact No. \_\_\_\_\_

Amount Payable Rs. \_\_\_\_\_

In Words Rupees \_\_\_\_\_

Due Date \_\_\_\_\_

Bank Authorized Signature with Stamp

Note:

1. Can be deposited free online in any branch of MCB.
2. All columns must be filled with legible handwriting.
3. All columns are mandatory.



**Khyber Medical University  
Affiliated Inst/Colleges Fee Slip**

MCB Bank Limited



Account No  
**0977029551007356**  
(Treasury Copy)

Date \_\_\_\_\_

**INSTITUTIONAL DEPOSITS**

Inst/ College Name \_\_\_\_\_

Purpose of Deposit \_\_\_\_\_

Semester/Year \_\_\_\_\_

No. of Students \_\_\_\_\_ Rate \_\_\_\_\_

Contact No. \_\_\_\_\_

Cheque/Draft# \_\_\_\_\_

**STUDENT'S/INDIVIDUAL DEPOSITS**

Name \_\_\_\_\_

Father's Name \_\_\_\_\_

Institute \_\_\_\_\_

Registration No. \_\_\_\_\_

Purpose of Deposit \_\_\_\_\_

Semester/ Year \_\_\_\_\_

Contact No. \_\_\_\_\_

Amount Payable Rs. \_\_\_\_\_

In Words Rupees \_\_\_\_\_

Due Date \_\_\_\_\_

Bank Authorized Signature with Stamp

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**Khyber Medical University  
Affiliated Inst/Colleges Fee Slip**

MCB Bank Limited



Account No  
**0977029551007356**  
(Institute/Student Copy)

Date \_\_\_\_\_

**INSTITUTIONAL DEPOSITS**

Inst/ College Name \_\_\_\_\_

Purpose of Deposit \_\_\_\_\_

Semester/Year \_\_\_\_\_

No. of Students \_\_\_\_\_ Rate \_\_\_\_\_

Contact No. \_\_\_\_\_

Cheque/Draft# \_\_\_\_\_

**STUDENT'S/INDIVIDUAL DEPOSITS**

Name \_\_\_\_\_

Father's Name \_\_\_\_\_

Institute \_\_\_\_\_

Registration No. \_\_\_\_\_

Purpose of Deposit \_\_\_\_\_

Semester/ Year \_\_\_\_\_

Contact No. \_\_\_\_\_

Amount Payable Rs. \_\_\_\_\_

In Words Rupees \_\_\_\_\_

Due Date \_\_\_\_\_

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**Khyber Medical University  
Affiliated Inst/Colleges Fee Slip**

MCB Bank Limited



Account No  
**0977029551007356**  
(KMU Copy)

Date \_\_\_\_\_

**INSTITUTIONAL DEPOSITS**

Inst/ College Name \_\_\_\_\_

Purpose of Deposit \_\_\_\_\_

Semester/Year \_\_\_\_\_

No. of Students \_\_\_\_\_ Rate \_\_\_\_\_

Contact No. \_\_\_\_\_

Cheque/Draft# \_\_\_\_\_

**STUDENT'S/INDIVIDUAL DEPOSITS**

Name \_\_\_\_\_

Father's Name \_\_\_\_\_

Institute \_\_\_\_\_

Registration No. \_\_\_\_\_

Purpose of Deposit \_\_\_\_\_

Semester/ Year \_\_\_\_\_

Contact No. \_\_\_\_\_

Amount Payable Rs. \_\_\_\_\_

In Words Rupees \_\_\_\_\_

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