



UNIVERSITY OF SWAT
Transcript Request Form
DUPLICATE

Registration No. _____ Roll No. _____ Session: _____ Passed out Year: _____

Department/Centre/Institute/College: _____

Program: _____

Name: _____ Father's Name: _____

CNIC: _____ Mobile No. _____ email: _____

Reason for apply (Please tick with \surd): Stolen/Lost Damaged

ANY OTHER (IF ANY) SPECIFY _____

Fee Deposited of Bank Al-Habib/NBP No. _____ dated: ____/____/20____ for Rs: _____

Applicant Signature: _____

Certified that the above-mentioned information are checked and found correct accordingly to this office

record.Name: _____

Signature of Coordinator _____

Signature with official seal of
Director/HOD/Incharge/Principal

ACKNOWLEDGEMENT FOR DUPLICATE TRANSCRIPT

Roll No. _____ Name: _____ Father's Name _____

Department/Centre/Institute/College Name: _____ Dated: _____

Dealing Clerk

Tick (√) relevant box please

S/No.	Information	Check Box
1.	Spelling of name is correct as per SSC	<input type="checkbox"/>
2.	Spelling of Father's name is correct as per SSC	<input type="checkbox"/>
3.	Date of birth is correct as per SSC	<input type="checkbox"/>
4.	Photocopy of SSC DMC	<input type="checkbox"/>
5.	Photocopy of CNIC	<input type="checkbox"/>
6.	Photocopy of Police FIR in case of stolen/lost	<input type="checkbox"/>
7.	If you have tick Damaged option then also attached the damaged documents	<input type="checkbox"/>
8.	01 color recent passport size photograph	<input type="checkbox"/>
9.	Original Fee Receipt of Rs: 1600/-	<input type="checkbox"/>

Note:

1. Normal time for processing and issuance of Transcript is approximately **15** working days.
2. Bring original CNIC and copy along with acknowledgement slip for collection of Transcript.
3. In-case transcript is being collected on your behalf then the nominated person during collection is to submit:
 - a) Acknowledgment slip
 - b) CNIC copy of the applicant
 - c) Original CNIC of nominated person