Page	<b>1</b> of	5	Roll No.
PR	Y P	UNIVERSITY OF BALOCHISTAN, QUETTA EXAMINATION FORM FOR EXTERNAL CANDIDATES FOR MASTER OF EDUCATION EXAMINATION ANNUAL/SUPPLEMENTRY, 20	(To be written by the University
	A A	Candidates are directed to fill in the fee Receipt, Examination & Permission forms carefully. Incomplete Forms will not be entertained & will be returned forthwith. The Forms will be considered to have reached the University office when these are received complete in all respects. In all other cases late fee, double fee, will be charged accordingly. Candidate including female must attach four copies of his/her C.N.I.C duly attested by the same authority who has attested the form otherwise, form will not be accepted.	Attach One Photographs here
1.		Name (in block letters) English	
		Urdu	
		(Name written here must correspond to the Candidate's Signature Below)	
		Also state whether Mr. or Miss or Mrs.	
2.		Father's Name (in block letters) English	
		Urdu	
3.		Relation: 4. (Sex) Male Femal	e 🗌
5.		Registration No. of University of Balochistan:	
6.		Permanent address: H.No.	
		City: District: Mobile No	
7.		Year of Passing B.Ed. Examination Annual/Supplementary	
8.		From University under Roll No	
9.		To be filled in by the Compartment/Exemption Candidates of Master of Educat	ion. Appeared in
		M.Ed. Annual/Supplementary Examination in year under Roll No	
		And was placed under compartment in the following subjects:-	
		1 2 3 4	

(Signature of the Candidate)

\_\_\_\_\_

=

Permanent District: - \_\_\_\_\_\_
Full Address: \_\_\_\_\_\_

Dated: \_\_\_\_/\_\_\_\_.

*"The Examination Form is liable to be cancelled if correct Registration No. or option are not mentioned"* 

# TO BE FILLED IN BY THE OFFICE

Amount Actually Due		Amount Received	Receipt / Challan No. and Date
(i)	Examination H	See	
(ii)	Late Fee		
(iii)	Registration F	ee	
	Reference mad	le by the Office to the defa	ulter:
	Letter No.	Dat	ted:
1.	Reminder No.	Dat	ed:
2.	Reminder No.	Dat	ed:
3.	Reminder No.	Dat	ed:

Space for Pasting Bank Challan / Receipt (Copy No. 2) Postal Orders, Bank Drafts & Cheques will not be accepted



Amount Still Due

ΓŶγ.	
VAL	
PR A.Ed.	

### EXAMINATION FORM FOR MASTER OF EDUCATION EXAMINATION ANNUAL/SUPPLEMENTARY EXAMINATION, 20\_

## FOR PRIVATE CANDIDATE

- The Examination will be held on the date to be notified in the Date-Sheet. Last date for Examination fee and permission-cum-Examination form to reach the in University office is as under:
- /- and Late fee payable under rules is Rs. Examination Fee is Rs. /- only. After the last date with late fee the candidates must deposit double the ordinary fee.
- The Examination Fee is payable only in cash through the Habib Bank Ltd., University of Balochistan, (University Branch), Quetta or (Through post office in the case of Mofussil candidate, only) on the Bank Challan prescribed for the University of Balochistan Quetta, during banking hours on all working days.

#### Postal Orders, Bank Drafts and Cheques shall not be accepted.

#### To,

The Controller of Examinations. University of Balochistan, Quetta.

Sir,

I request permission to present myself at the ensuring Master of Education Examination, of the University of Balochistan, to be held in Annual/Supply: 20

(Particulars to be filled in by the candidate neatly and legibly in his/her own handwriting) Corrections if any should be initialed by the officer attesting the certificates on the reverse of this Form:-

1.	Name (in block letters)	English				
		Urdu				
	(Name written here mi	ust correspon	d to the Candidate's Signature Below)			
	Also state whether Mr. or Mi	iss or Mrs				
2.	Father's Name (in block lett	ers) English				
		Urdu				
3.	Religion		4. Caste, in any			
5.	Present Address:					
6.	Permanent home Address: _					
7.	Registered No. of (Balochist	tan University	/)			
8.	Centre at which to be exami	ned				
9.	Passed B.Ed. Examined in		from			
	University under Roll No					
10.	Medium of Examination Eng	glish/Urdu				
11.	To be filled in by the compartment/Exemption Candidate only.					
	Appeared in M.Ed. Annual/Supplementary Examination 20 under Roll No.					
	1	2	3			
	I solemnly declare that: -					
	<ul> <li>(i) I have read all the in</li> <li>(ii) I have filled in the E</li> <li>(iii) Lam not a Student of</li> </ul>	Examination f	orm in my own handwriting			

(111) I am not a Student of Double Course.

#### **MOST IMPORTNAT** 5



1. The attestor's name & designation should both be entered by the officer signing the form 2. Four latest photographs must be attached with examination form, (female candidates are not exempted) 3. Four attested copies of National Identity Card. 4. No examination form will be accepted without Photostat / attested copy of registration card.

Roll No.

Attach One Photograph

here

Year of passing B.Ed. Examination.

Year \_\_\_\_\_ I declare that: - Roll No. \_\_\_\_

- All the particulars are correct and that in case of any difficulty arising out inaccuracy therein I
- shall be responsible for the consequences.I have not attended any college as a regular student during the academic year proceeding the examination and I am not the candidate of double course.
- 3. I am still employed as a whole time paid teacher in a recognized Primary/Middle/High School affiliated College/Government Education Institution.

I am. Etc

	Station	Signature:
	Permanent District	Present Full Address of the Candidate
The	20	

## CERTIFICATE

Officer signing the certificates below are requested to kindly see that the blanks in certificate Nos. I & II are duly filled in before these certificates are signed

I certify that the candidate has attached herewith the original University fee receipt no. \_\_\_\_\_ Dated. \_\_\_/\_\_\_ for Rs. \_\_\_\_/- as examination fee for the Master of Education Examination.

Under no circumstances shall any officer forward Examination form of any candidate to the University Officer unless that candidate has attached the University Fee receipt.

Seal or Office Stamp Principal/Head Master/Head Mistress College/School. Signature of the attesting Authority

I certify that the above named candidate has satisfied me by the production of the University Certificate. That he/she passed the \_\_\_\_\_\_ Examination of the \_\_\_\_\_\_ University: that he/she is of good moral character: that he/she has signed the above application and the prima facia he/she is eligible to appear as a private candidate in the B.Ed. Examination under status \_\_\_\_\_\_ as printed on the permission form.

Dated: \_\_\_\_/\_\_\_\_.

Signature: \_\_\_\_\_

Headmistress/Headmaster/Principal \_\_\_\_\_

The candidate may get this certificate signed as under: -

Teacher and teacheresses may get this certificate signed by the Head Master of Head Mistress of a recognized High School. In case of late college candidates this certificate should be signed by the Principal of college last attended.

The Examination form will be liable to be cancelled if correct Registered Number of the Balochistan University is not mentioned or if any Incomplete or incorrect entry is made in the Form or Examination fee is not received in this office in time.

Candidate will be shown as belonging to this District in all University Records while corresponding the candidate must always mention the name of district.

### Page 5

Page <b>5</b> of 5	Roll No			
	(TO BE FILLED	IN BY THE CAN		Attach One
Note	<ul> <li>i) The Candidate will be admitted to the of this <i>Roll No. Slip.</i></li> <li>ii) The Candidate, must keep his / him / her in the Examination Hall</li> <li>iii) Bring your own ink (blue/black) to show the state of the st</li></ul>	her Original <u>National Id</u> while taking the Examination	<i>dentity Card</i> with	Attach One Copy of Your Photograph & One copy of C.N.I.C here
	UNIVERSITY OF	BALOCHISTAN	, QUETTA.	
Admit		Son / Daughter of		
	acation Department, University of B			
to be held	on the Date as given in the date-she	eet at the Centre.		
		2	3	
Signature	of Candidate		Controller of E University of	
	Address given below should be within No Correspondence shall be made of			у
		REGISTERED		
	· -	oatch of Certificate, if su	Ū.	
	Name			

UNDER POSTAL CERTIFICATE	
Address for Despatch of Result Card	

Address.

Roll No.			
Name.			

Address.

Address for Despatch of Roll Numb	er
Roll No	

Name.		 	
Address.		 	