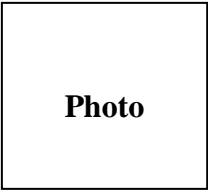


**CHINESE for Professional Purposes  
CERTIFICATE STUDENT REGISTRATION FORM**

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

Postal Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ CNIC#: \_\_\_\_\_ Email ID: \_\_\_\_\_  
(DD/MM/YY) (In case of applicant's age <18, provide CNIC # of Father)

Phone (Office) \_\_\_\_\_ (Res): \_\_\_\_\_ Cell #: \_\_\_\_\_

Are you already admitted in any Regular Program at SZABIST?  Yes  No

Have you taken Certificate Courses at SZABIST earlier?

 Yes Registration #: \_\_\_\_\_  No

- I understand that my acceptance as certificate student is not binding upon the Institute to accept me as a regular student.
- Courses will be offered subject to sufficient number of candidates registering. In case of cancellation of course, or non-availability of seat, full fee will be refunded.
- Attach one copy of fee receipt.

\_\_\_\_\_  
Student's (Sign & Date)**For Official Use Only****Registration #:** \_\_\_\_\_\_\_\_\_\_  
Ms. Hira Anwar-Program Manager (Languages)  
(Sign & Date)**Finance Office**

Total fee payable: Rs. \_\_\_\_\_ Total fee paid: Rs. \_\_\_\_\_.

\_\_\_\_\_  
Financial Office (Sign & Date)