



COMSATS University Islamabad

Wah Campus

COURSE REGISTRATION AFTER DEADLINE-APPLICATION FORM

Name:		Registration No:		
Program _.	Sem:	Section:	Department:	
State Rea	ason for Late Course	Registration:		
I declare	that I will be respo		ce for the issuance of Admit	
Examina	itions.		Student Sig Mobile No: Date:	
Sr.No	Course Code	Course Title	Class / section	Concerned Teacher Signature
1				Teacher Signature
2				
3				
4				
5				
6				
7			·*	
	CERTIFIED THAT STUDEN	IT IS NOT DECLARED DI STATU	S IN THE PREVIOUS SEMESTER. Signatu	re of DCOs
Date:			Date:	
		Approved / Not Ap (for Course registration a Signature of Head of Dep Date:	fter deadline)	

Academics Section

Examination Office