



**Peoples University of Medical & Health Sciences for
Women Shaheed Benazirabad, Sindh, Pakistan**

REGISTRATION FORM

6th Convocation 2024

The Chairman Convocation/ Chairman Registration Committee.

I hereby register myself to receive Degree Certificate in Convocation 2024.

My particulars are as under

Name of Student		
Enrollment No		
C.N.I.C No		
Year of Graduation:		
Degree Program:	Undergraduate_____	Postgraduate_____
Present Postal Address		
Cell No:		

Dated: ___/___/_____

Signature of Student

This form must be accompanied by your two recent Passport Size Photographs mentioning Name, Father Name and Year of Graduation.

Convocation Registration Fee Paid Challan:_____

The last date for receiving the "Convocation Registration Form" is 25th January, 2024

For Office Use Only

Checked By	Signature:	Chairman Registration Convocation
	Name:	