

## Sarhad University

## of Science & IT, Peshawar

## APPLICATION FOR COURSE EXEMPTION / CREDIT HOURS TRANSFER

Name o	f Student:	····				
Father I	Name:					
Registra	ation Number (If Allotted	l by SUIT):				
Progran	n:	S	emester (If already enrolled	1):		
Name o	f Approved Study Centre	e (if distant student):				
Name o	f previous Degree on the	basis of which applied for Exemptio	n/ Credit Hours Transfer:			
Name o	f University/Institute fro	m where previous Degree was earned	l:			
Postal A	Address:					
		Contact Nun	nber:			
		(Name of Courses for Exemptio	on/Cr. Hr. Transfer)			
1.	Course 1:					
		Marks Obtained in Course:	Total Marks			
2.	Course 2:					
	Grade Obtained:	Marks Obtained in Course:	Total Marks			
3.	Course 3:					
	Grade Obtained:	Marks Obtained in Course:	Total Marks			
4.	Course 4:					
		Marks Obtained in Course:	Total Marks			
5.	Course 5:					
		Marks Obtained in Course:	Total Marks			
Dated:	/ /20	Signature of the Applicant				
Ciarat	une and Seel of Control	(For Study Centre	v Use)			
	<pre>ire and Seal of Centre N imended &amp; Forwarded to</pre>	_				
(recom	included & Forwarded to	Examination Section)		Dated:	1	/20
Prescri	(The fee can b	r. Hr. Transfer Fee: <b>Rs.3000/-</b> e deposited after the grant of exempti				
Importo	ant Note:					
		nts should submit their fee through Co e Verified DMC/Transcript.	11 0 0 1	oper channel.		

- Course Outlines of the Courses for which application is made.
- All Course Outlines must be dully signed and sealed by the Dean/HoD of concern Faculty.
- No Application will be accepted without verified DMC/Transcript and Course Outlines
- An Extra Sheet can be used if course are more than five.
- Applications should be sent to the following address.