PM LAPTOP SCHEME PHASE-IV CORRECTION PERFORMA

Name: _____

Father's Name: _____

CNIC No: _____

Department: _____

Enrollment No/ Registration No:_____ Roll No:_____

Degree: _____ Semester:_____

Email:_____ Contact No:_____

Date of Admission: _____

Sr. No:	Incorrect Information	Information that Needs to be Updated
1		
2		
3		
4		
5		
6		
7		
8		

_____

Student's Signature with Date

_____

Departmental Focal Person's Signature & Stamp