SHAHEED MIR SIKANDAR ZEHRI UNIVERSITY
KHUZDAR, BALOCHISTAN

ADMISSION FORM
UNDERGRADUATE PROGRAMS

IMPORTANT INSTRUCTIONS

1. Candidates are advised to select their program of study carefully before applying.
2. Candidates must list at least three programs of study, in order of priority.
3. The admission form that is incomplete, lacks the required documents, or is received after the due date is liable to rejection.
4. Cutting or overwriting on the admission form will not be accepted.
5. The admission processing fee is non-refundable.

PROGRAM OF STUDIES APPLYING FOR

(You may apply for more than one program)

Priority I	Priority II	Priority III

APPLICANT INFORMATION

Name (Block Letters)			Affix Recent Passport-size Photograph
Gender ☐ Male ☐ Female	**Nationality**	**Religion**	
Date of Birth (DD / MM / YYYY)	**Name of District (Domicile)**	**Name of Province**	

CNIC / B-Form # | | | | | | - | | | | | | | | | - | |

Permanent Address	
Present Address (tick if same as permanent ☐)	
Phone #	**Mobile #**
Email Address	**Blood Group**

FATEHR'S / GUARDIAN'S INFORMATION

Father's Name (Block Letters)	**Mobile #**
Occupation	**Office Contact #**
Office Address	**Email**

Father's / Guardian's CNIC # | | | | | | - | | | | | | | | | - | |

ACADEMIC RECORD

Examination	Year	Board / University	Roll #	Total Marks	Obtained Marks	Div. / CGPA / Grade	Major Subjects
SSC / O-Level / Equivalent							
HSSC / A-Level / Equivalent							
BA / BSc / Associate Degree / Equivalent							

ADMISSION PROCESSING FEE

The admission processing fee of **Rs. 2,500/- (Rupees Two Thousand Five Hundred Only**) may be deposited at any United Bank Limited (UBL) branch nationwide using the prescribed challan, deposited in the account given below with the **narration of the applicant's Name and CNIC #**, or submitted as a pay order drawn in favour of "Registrar, Shaheed Mir Sikandar Zehri University, Khuzdar." The original deposit receipt/slip (or pay order) must be attached to this admission form at the time of submission.

- Account Title: Revenue Account Shaheed Mir Sikandar Zehri University, Khuzdar
- Bank: United Bank Limited (UBL)
- Branch Code 1357
- Account Number: 401105041

Deposit Receipt / Slip No.: _____ Amount (Rs.): _____ Date:_____

LIST OF ATTESTED DOCUMENTS TO BE ATTACHED

S.#	Document	Copies Required	Attached
1	DMC & Certificate of HSSC / DAE or equivalent	2 attested copies of each	☐
2	DMC & Certificate of SSC / Matriculation or equivalent	2 attested copies of each	☐
3	CNIC / B-Form of the Candidate	2 attested copies	☐
4	Father's/Guardian's CNIC	2 attested copies	☐
5	Local / Domicile Certificate	2 attested copies	☐
6	Character Certificate from institution last attended	2 attested copies	☐
7	Fitness Certificate issued by the District Health Officer (DHO)	2 copies	☐
8	Recent passport-size photograph (white background)	4 photographs	☐
8	Original UBL bank deposit receipt / slip (Admission processing fee)	Original	☐

UNDERTAKING & DECLARATION BY APPLICANT AND GUARDIAN

I hereby solemnly declare that all information provided in this application is true, complete, and correct to the best of my knowledge. I understand that any false statement, omission, or concealment of facts shall render this application liable to rejection or, if admission has already been granted, to immediate cancellation of admission and expulsion from Shaheed Mir Sikandar Zehri University, Khuzdar. I further undertake to abide by the rules, regulations, and code of conduct of the University at all times.

Date: _____ Signature of Applicant Signature of Father / Guardian

Registrar
Shaheed Mir Sikandar Zehri University, Khuzdar
Email: registrarsmszu@gmail.com

FOR OFFICE USE ONLY

Form Serial #: ______________________________________

Date Received: __________________________________

Received By: _______________________________________

Signature:

Remarks: ____

✂ - ✂

TEAR-OFF ACKNOWLEDGEMENT RECEIPT — STUDENT COPY

SHAHEED MIR SIKANDAR ZEHRI UNIVERSITY, KHUZDAR — ADMISSION ACKNOWLEDGEMENT RECEIPT			
Form Serial #:		**Submission Date:**	__________ / _________ / 2026
Applicant's Name:		**Father's Name:**	
Priority :		**Deposit Receipt / Slip #:**	
Amount Paid (Rs.):	**2,500/-**	**Received By (Staff):**	
Official Stamp & Signature:			

SHAHEED MIR SIKANDAR ZEHRI UNIVERSITY, KHUZDAR

Ameen Islamic Banking

BANKS COPY

UNITED BANK LIMITED (UBL)
Khuzdar Branch Code 1357
Revenue account Shaheed Mir Sikandar Zehri University
A/C #: 401105041

Date: ____ / ____ / _____ **Challan #:** _____

Name: _____

CNIC/B-Form: _____

Father's Name: _____

Dept / Program: _____

Roll No #: _____

Semester: _____

S. NO	Particulars	Amount (Rs.)
1	Admission / Registration Fee	
2	Semester Fee	
3	Examination Fee	
4	Transcript/Degree	
5	Others	
	TOTAL AMOUNT (Rs.)	

Amount in Words:

_____

Bank Official Signature & Stamp **Depositor Signature**

Note:

1. Overwriting or any modification is not accepted.
2. University is not responsible if paid receipt is lost by the student.

SHAHEED MIR SIKANDAR ZEHRI UNIVERSITY, KHUZDAR

Ameen Islamic Banking

DEPARTMENT COPY

UNITED BANK LIMITED (UBL)
Khuzdar Branch Code 1357
Revenue account Shaheed Mir Sikandar Zehri University
A/C #: 401105041

Date: ____ / ____ / _____ **Challan #:** _____

Name: _____

CNIC/B-Form: _____

Father's Name: _____

Dept / Program: _____

Roll No #: _____

Semester: _____

S. NO	Particulars	Amount (Rs.)
1	Admission / Registration Fee	
2	Semester Fee	
3	Examination Fee	
4	Transcript/Degree	
5	Others	
	TOTAL AMOUNT (Rs.)	

Amount in Words:

_____

Bank Official Signature & Stamp **Depositor Signature**

Note:

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2. University is not responsible if paid receipt is lost by the student.

SHAHEED MIR SIKANDAR ZEHRI UNIVERSITY, KHUZDAR

Ameen Islamic Banking

FINANCE COPY

UNITED BANK LIMITED (UBL)
Khuzdar Branch Code 1357
Revenue account Shaheed Mir Sikandar Zehri University
A/C #: 401105041

Date: ____ / ____ / _____ **Challan #:** _____

Name: _____

CNIC/B-Form: _____

Father's Name: _____

Dept / Program: _____

Roll No #: _____

Semester: _____

S. NO	Particulars	Amount (Rs.)
1	Admission / Registration Fee	
2	Semester Fee	
3	Examination Fee	
4	Transcript/Degree	
5	Others	
	TOTAL AMOUNT (Rs.)	

Amount in Words:

_____

Bank Official Signature & Stamp **Depositor Signature**

Note:

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SHAHEED MIR SIKANDAR ZEHRI UNIVERSITY, KHUZDAR

Ameen Islamic Banking

STUDENT COPY

UNITED BANK LIMITED (UBL)
Khuzdar Branch Code 1357
Revenue account Shaheed Mir Sikandar Zehri University
A/C #: 401105041

Date: ____ / ____ / _____ **Challan #:** _____

Name: _____

CNIC/B-Form: _____

Father's Name: _____

Dept / Program: _____

Roll No #: _____

Semester: _____

S. NO	Particulars	Amount (Rs.)
1	Admission / Registration Fee	
2	Semester Fee	
3	Examination Fee	
4	Transcript/Degree	
5	Others	
	TOTAL AMOUNT (Rs.)	

Amount in Words:

_____

Bank Official Signature & Stamp **Depositor Signature**

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