



BAHAUDDIN ZAKARIYA UNIVERSITY, MULTAN

(TO BE FILLED IN BY THE CANDIDATE)
Examination Slip for BS (4-Years) Program
For Candidate Only

Roll No.:

College Name: _____

Subject: _____ Session: _____ Semester: _____

Admit _____ Son/Daughter of _____

Subject in which to be examined

Sr.#	Course/s Name	Course code
1		
2		
3		
4		
5		
6		
7		

Sr.#	Course/s Name (Repeaters only)	Course code
1		
2		
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7		

Paste Photo
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Signature of the Candidate

Signature & Stamp Head of the Department



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For Centre Superintendent Only

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