GC University Faisalabad
(Course Work for M.Sc. / M.Phil. / Ph.D.)

1. Department: _______________________________________________________

2. Name of the Student: _______________________________________________

3. Registration No: ___________________________________________________

4. Date of Admission: _________________________________________________

5. Name of the Supervisor: ____________________________________________

6. Supervisory Committee:                                               Signature
   I. ____________________________ (Chairman) ____________________________
   II. ____________________________ (Member) ______________________________
   III. ____________________________ (Member) ______________________________
   IV. ____________________________ (Special / Additional member if any) ______

Course Work

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<th>Course No</th>
<th>Title of the Course</th>
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<td>a)</td>
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<td>d)</td>
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Dean,                                           Chairman,
Faculty of _____________________________      Department of _____________________________
GCUF                                             GCUF

Director,
Advanced Studies
GCUF