| Serving Humanity | Memon Fe Committee GLISH & SPOKEN MISSION FORM | | AL PRISTAN MEMON FIDIN |
|--|---|--|--|
| (E Student ID | BESC) 23A (BATCH-01) | Fo | rm Processing Fees |
| PERSONAL INFORMATION: | | | KS. 500/- |
| Name of Student: | | | |
| Father Name: | | | |
| Father / Guardian's CNIC No.: | Guardian's Cell No | | РНОТО |
| Date of Birth: Age: | Mother Tongue: | | РНОТО |
| Student CNIC No./ B. Form No | | | |
| Full & Permenant Address: | | | |
| Cell # Email: | | Phone # _ | |
| Student WhatsApp No | | ? Yes No | |
| If Yes so mention Jamat Name: | | _ Surname: | |
| Which class do you study? | | | |
| Studying at | | Timing | |
| FROM WHERE DID YOU HEAR ABOUT OL | JR COURSE? | | |
| Instagram Facebook | WhatsApp | Other | |
| DECLARATION UNDERTAKING BY PAR 1. I/We, hereby accept the responsibilities of good conduct ethnic, but learning during his stay in the program. 2. During the course of studies, student will have to pass 3. I hereby, solemnly declare that the data and facts mereby my all establish and future regulation and policies of A 4. I shall be held responsible for any sort of damage to the will pay the penalties and deemed appropriate by competing 5. Defiance will render my admission cancelled at any policies. | act and guarantee that he will not be with 80% rigorous exam and comp ntioned herein are true and correct to APMF. The property of APMF caused by the s stent authority. Doint in time. | lete software projects to st o the best of my knowledge | ay in the program. e, further, I will abide |
| | Parent's Signature | Student's Signatu | ıre |
| • Fees once paid, non-refundable ne • Assigning class timing slots are so | | hich may vary due cours | e of time. |
| FOR Remarks: | R OFFICE USE ONLY | Office Tim MONDAY to SATURDAY SUNDAY 11:30 am to 2:0 | 3:00 pm to 09:00 pm |
| | | | |

😢 I. T. Committee - All Pakistan Memon Federation, Farooq Motlani Road, Near Islamia College, Karachi. . 🕲 021-34134856 - 60, 0306-2619045