



# SALIM HABIB UNIVERSITY KARACHI

Nc-24, Deh Dih, Korangi Creek Karachi-74900

## APPLICATION FOR ISSUANCE OF FINAL TRANSCRIPT

(For free issue of Final Transcript on Completion of all Degree Requirements)

**To be filled by the student (please read instructions below before filling up)**

Reg #: \_\_\_\_\_ Name of Graduate Student: \_\_\_\_\_  
 Father's Name: \_\_\_\_\_ Program: \_\_\_\_\_ Class & Section: \_\_\_\_\_  
 Session: Morning / Evening / Weekend **Year & Semester of Passing the Last Examination** \_\_\_\_\_  
 Telephone# (Res): \_\_\_\_\_ Mob: \_\_\_\_\_ E-mail: \_\_\_\_\_

Please issue me free of cost Final Transcript. I hereby undertake the following:

- that I have completed my all-degree requirements, attached copy of my Result intimation, cleared my all dues and nothing is outstanding against me from any Department of the University.
- I have not received free of cost original Final Transcript so far.

Name of the student /graduate: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **Chairperson's Clearance & Recommendations:**

1. Please ensure nothing is outstanding against the student / graduate **including Labs**.
2. Please ensure that student / graduate has fulfilled all degree requirements as per plan of study and secured minimum required or above CGPA within the prescribed qualifying period required to qualify the degree requirements. Student Result Intimation is attached for reference.

Cleared & Recommended:  Not Recommended:  Date: \_\_\_\_\_ Chairperson's Signature & Stamp: \_\_\_\_\_

**QEC's Office Clearance:** Cleared  Signature & Stamp: \_\_\_\_\_

### **Library Clearance** : (Please ensure nothing is outstanding against the student / graduate)

Cleared, nothing is outstanding  Not cleared due to \_\_\_\_\_  
Date: \_\_\_\_\_ Librarian's Signature: \_\_\_\_\_ Office Stamp: \_\_\_\_\_

### **Accounts Department Clearance:**

It is certified that all dues in respect of the above mentioned graduate student is cleared and nothing is outstanding against him / her.

Date: \_\_\_\_\_ Office Stamp: \_\_\_\_\_ Accounts Officer's Signature: \_\_\_\_\_

### **Registration Department & Admission Office Clearance:**

1. It is certified that all credentials required to confirm admission of the above mentioned student have been received and nothing is outstanding against him / her pertaining to confirmation of his / her Admission. **Name and Father's name of the student (along with spelling) in the database has been verified and found correct as per SSC document.**

2. **SHU ID Card** received from the student / graduate: Yes  No  Remarks \_\_\_\_\_

Date: \_\_\_\_\_ Registrar's Secretariat Signature: \_\_\_\_\_ Admission Office Signature: \_\_\_\_\_ Office Stamp: \_\_\_\_\_

### **Clearance from Miscellaneous Departments:**

It is certified that nothing is outstanding against the student /graduate.

**Admin Department:** Cleared, nothing is out standing  Signature: \_\_\_\_\_ Office stamp \_\_\_\_\_

**Hostel Warden's Office:** Cleared, nothing is out standing  Signature: \_\_\_\_\_ Office stamp \_\_\_\_\_

### **Examinations Department (for office use only):**

Application (subject to verification) received by: Name: \_\_\_\_\_ on (date) \_\_\_\_\_ Signature: \_\_\_\_\_

Tentative date of delivery: \_\_\_\_\_ Transcript prepared by: \_\_\_\_\_ Verified by: \_\_\_\_\_

As per record held, student has **not** received free of cost Final Transcript so far.

Transcript delivered on \_\_\_\_\_ Signature of student ( on receiving Transcript) \_\_\_\_\_

### **Instructions:**

- Before applying for issuance of Final Transcript (1<sup>st</sup> free issue), please ensure that:
- Academic Deficiency (if any) has been cleared. **Please attach copy of Result Intimation already issued.**
- No liability of any Department including Fee etc; is outstanding against you.
- If you have already obtained clearance from the Departments mentioned above, please attach copy of the same in lieu of the clearance.
- After receipt of application in the Examinations Department, delivery of the Transcript will be within fourteen working days.
- Please deposit this Form in the Examinations Department when clearance from all concerned has been obtained.

## **Receipt for Graduate Student - Application for Issuance of Final (Free issue) Transcript**

### **Particulars to be Filled by the Graduate**

Reg #: \_\_\_\_\_ Name of Graduate Student: \_\_\_\_\_ Class & Section: \_\_\_\_\_

Expected Delivery Date (which will be subject to verification of records & entitlement): \_\_\_\_\_

Signature of receiving person: \_\_\_\_\_ Name: \_\_\_\_\_ Office Stamp. \_\_\_\_\_

(Designed & Prepared by SHU Examinations Department)