**Quaid-i-Azam University**

 **Islamabad**

**Subject: Permission for Arrangement of Graduation Ceremony**

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program (Please encircle): B.S./M.Phil./Ph.D.

Batch/Session: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Required: **Gowns and Caps**

Quantity**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Venue: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date & time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Yours obediently

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mr/Ms.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Class Representative

 Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Contact No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Chairperson**

**Registrar**

**P.S.O**

**To**

**The Registrar**

**Quaid-i-Azam University**

**Islamabad.**

**(Through Chairman)**

**Subject: Permission for Arrangement of Graduation Ceremony**

Department: Department of Mathematics

Program:

Batch:

Required: Gowns and Mortar Boards

Venue:

Date & time:

 Yours obediently

Signature:

Mr/Ms.

 Class Representative

 Dated:

 Contact No.

**Chairman**