



FACULTY OF ENGINEERING SCIENCE & TECHNOLOGY / ZIAUDDIN UNIVERSITY

ZUFEST GAT REGISTRATION FORM

Type of GAT Test (Please tick any one)

GAT (Subject) for PhD

GAT (General) for MS/ME

Personal Information (Use CAPITAL letters)

Name in Full: _____

Father's Name: _____

Candidate CNIC #: _____

Enrollment #: _____

Postal Address: _____

Email: _____

Mobile: _____

Academic Information

Certificate / Degree Name	Degree Title	Specialization / Major Subject	Year of Passing	Obtained % / CGPA	Board / University
SSC / Matric (10 Years)					
HSSC / Intermediate (12 Years)					
Bachelor (16 Years)					
MS (18 Years)					

Date: _____

Signature of Candidate: _____

For Official Use (do not write below this line)

Remarks

Director PGP Signature & Date