GC UNIVERSITY LAHORE
Co-Curricular Activity Form

Submit Separate Form for each Co-Curricular Activity along with General Admission Form.

Please affix attested photograph
1.5" x 1.5"

Particular of candidate for admission to Group

On the basis of ___________ category

NOTE: Write in Capital Letters the Category on the basis of which the application is submitted

Class __________ Year __________ Session __________

Name ____________________________________________

Father’s Name ______________________________________

Father’s/Guardian’s Occupation ________________________

Candidate’s Date of Birth ____________________________

Sr. No. __________ EXAMINATION RESULTS

<table>
<thead>
<tr>
<th>Examination</th>
<th>Year</th>
<th>Roll No.</th>
<th>Board/University</th>
<th>School/College/University</th>
<th>Subjects</th>
<th>Marks</th>
<th>Grade/Div.</th>
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</thead>
<tbody>
<tr>
<td>SSC (Equivalent)</td>
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<td>HSSC (Equivalent)</td>
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</tbody>
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Compulsory Subjects
i) __________________________________________
ii) __________________________________________

iv) __________________________________________
v, vi) _______________________________________

Previous Performance (Attached Attested Testimonials)
a) Inter School/Board.  
b) District/Divisional Level.  
c) Colour Holder or Member of Provincial / National Teams.

Applicant’s Signature ____________________________________________

ADMITTED

Chairman Societies Board ____________________________________________

Registrar ____________________________________________

Convener’s Verification ____________________________________________

Sr. No. __________ TO BE FILLED IN BY THE CANDIDATE

<table>
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<tr>
<th>Category</th>
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<th>Class</th>
<th>Session</th>
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Name ____________________________________________

Father’s Name ______________________________________

Father’s Occupation ________________________

Candidate’s Date of Birth ____________________________

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Applicant’s Signature ____________________________________________

TO BE FILLED IN BY THE CANDIDATE

Signature of Bank Officer with Stamp: ____________________________

Form No.: ____________________________

Name of Applicant: ____________________________________________

Father’s Name ____________________________________________

Group/Major/Subject: ____________________________________________

Basis of Admission: ____________________________________________

Date of Interview/Trial/Test: ____________________________

Marks: ____________________________ Date: ____________________________

NOTE:- The candidate must keep this receipt/slip to be produced at the time of interview/trials. No entry in the campus will be allowed without this slip.
UNDEARTAKING

1. I will abide by the rules & regulations of the University, and attend regular practice sessions and will represent University / Board and other Competitions, failing which, any action taken by the University authorities shall by binding on me.

2. In case I am admitted to FA/FSc/ICom or BA/BSc (Hons) Programme I will abide by the rules and regulations of the University, I know and understand that my admission to FA/FSc/ICom or BA/BSc (Hons) at that time will be deemed to have been made on co-curricular basis.

3. In case of mis-statement / violation of the rules / regulations the University shall be authorised to take any disciplinary action against me including expulsion from the University.

Signature of Father/Guardian ..........................................

Applicant’s Signature ..................................................

Name .................................................................

Name .................................................................

TO BE FILLED IN BY THE CONVENER TRIAL COMMITTEE

Position in the merit of Trials ..................................................

Recommended for Admission to the Group offered ..................................

Advised to change over to Group ..............................................

Note: Attested copies of certificates of Academic Record, Character and Co-Curricular Activities be attached with this form.