**NUST School of Electrical Engineering and Computer Science**

 *A center of excellence for quality education and research*

**Request for Make Up of Missed Exams**

Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CMS ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Class \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Section\_\_\_\_\_\_\_ Semester \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CGPA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- |
| **S. No.** | **Subject Title** | **Name of Instructor** | **Date of Exam** |
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*Brief:*

*Supporting Documents attached with this application;*

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ Student’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(For Official Use Only)**

**Remarks of UG Coordinator**