Muslim Youth University-Islamabad

Street 40, I & T Center, G-10/4, Islamabad

Ph: 051-2555222, 8733217-18

contact@myu.edu.pk

**SEMESTER BREAK FORM**

Registration Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Semester ⃝ Fall ⃝ Spring 20\_\_\_\_\_\_\_\_\_\_\_ No. of Semesters Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_

GPA: \_\_\_\_\_\_\_\_\_\_ CGPA: \_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Break Required ⃝ From: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ ⃝ To: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_

Reason \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dated Student’s Signature

**CLEARANCE**

|  |  |  |
| --- | --- | --- |
| **Lab** | **Library** | **Account Office** |
|  |  |  |

|  |
| --- |
| **FOR OFFICE USE ONLY** |

**RECOMMENDATIONS**

\_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dated Dean/HoD

**APROVAL**

\_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dated Vice Chancellor

**REGISTRAR OFFICE**

\_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Entered by/Dated Verified by /Dated

•Get a challan from Account Office by submitting a copy of approved form.

•Deposit Semester Break Fee Rs. /- in Bank and submit the form with fee receipt in Registrar Office.