



TIMES INSTITUTE

MULTAN, PAKISTAN
A Degree Awarding Institute Established under Govt. of the Punjab Act XXV-2020

PHD COMPREHENSIVE EXAMINATION FORM

Student Name: _____

Registration Number: _____

Program: _____

Department: _____

CLEARANCE STATUS

1. EXAMINATION STATUS (To be Filled by Exam Branch)

Category	Required	Current Status
Course Work	Completed	
CGPA	3.0 CGPA	

2. FEE STATUS (To be Filled by Finance Department)

Fee Paid up to Month —
M M Y Y Y Y

Comprehensive Exam Fee Paid: Yes No

Incharge Examination

ATTACH RECEIPT OF PAID COMPREHENSIVE EXAM FEE.

Accounts Officer

Submitted By

Approved By

Date: _____

Date: _____

For Office Use Only: _____
