



**SHAHEED ZULFIQAR ALI BHUTTO**  
**MEDICAL UNIVERSITY**  
EXAMINATIONS DEPARTMENT

**TRANSCRIPT FORM**

Dated: \_\_\_\_\_

To

The Controller of Examinations  
SZAB Medical University,  
PIMS G-8/3, Islamabad

Subject: **ISSUANCE OF TRANSCRIPT**

Sir,

I have passed my \_\_\_\_\_ Examinations on \_\_\_\_\_ under  
Roll No \_\_\_\_\_

I have deposited the required fee Rs. \_\_\_\_\_/- with Challan No \_\_\_\_\_  
Dated: \_\_\_\_\_

Kindly Issue me the Provisional Certificate/Transcript.

Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Registration No: \_\_\_\_\_

Specialty: \_\_\_\_\_

Thesis Title: \_\_\_\_\_

Mobile No: \_\_\_\_\_

E-Mail: \_\_\_\_\_

\_\_\_\_\_  
**Applicant Signature**