ADMISSION FORM

BS (Four Year Degree Program) 2026-30

LIVE TO LEARN

Govt. Graduate College For Women Gulberg, Lahore

Website: http://www.ggcwg.edu.pk

Incomplete form will not be entertained

To be filled in by the applicant herself

Entry No.

F.A/F.Sc. Marks	Total Marks	Board Roll No.	Board Registration No.

Category of Application

- ☐ Merit
- ☐ Disable
- ☐ Minority
- ☐ Transgender

For Office Use Only

Admitted

Merit No: _____

Date: _____

Roll No: _____

Major Subject: _____

B.S. (FYDP)

Discipline:

Affix a recent photograph with white background (Not to be attested at front) 1.5 x 1.5 inches

1. Name of Applicant in full (Block Letters)
2. Applicants "B Form" / CNIC No.
3. Date of Birth _____ Religion _____ Nationality _____
4. Whatsapp No.(Student): _____ Email(Student): _____ Linkedin Address: _____
5. Father's Name (Block Letter)
6. Father's CNIC No. _____-_____-_____
7. Father's Occupation: _____
8. Correspondence Address: _____
9. If the Applicant's father is no longer alive, or is not her legal guardian, please provide the following information
   - (a) Name of Guardian (Block Letters) _____
   - (b) Address and telephone No. _____
10. Parents/Guardian Whatsapp No. _____ Parents/Guardian Contact No: _____

Application Form for Admission

Entry No. _____

Received application for admission to BS (FYDP) from (Applicant's Name) _____

on _____ in Discipline _____

Entry No. _____

Marks F.A./F. Sc. _____

for Principal

Govt. Graduate College for Women Gulberg, Lahore

Tel: 042-99263007

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Academic Record

10. Name of the Institution at which applicant has been educated, with dates (Beginning with the most recent attended)

	Year of Passing	Board	Name of Institution	Roll No.	Marks Obtained	Total Marks	Grade	Subjects
F.A / F.Sc / A Level								
Matriculation / O Level								

Candidates who hold qualifications other than Matriculation will be required to provide Equivalence certificate from Inter Boards Coordination Commission

11. In case of emergency contact:_____

Mr. / Mrs. / Ms._____ Relationship to Applicant: _____
(Only parents & real brothers)

ID Card No. | | | | | | – | | | | | | | | – | |

Phone No. (Res)_____ Office:_____ Mobile No:_____

Address:_____

I solemnly affirm and declare that the above information provided by me is correct. I have read and understood the college prospectus and the terms and conditions of the admission procedure. I agree to abide by the rules and regulations of the college. Any decision made or disciplinary action taken by the Principal and the college council is final in all matters.

To be Noted: *It is very important that if any student is found guilty of any political involvement and affiliation, she will be expelled from the college after an enquiry.*

Date_____

_____
Signature of Parents / Guardian

_____
Signature of Applicant

NOTE: At the time of FORM SUBMISSION
The following documents should be attached.

- One (1) copy of Matric/O Level Equivalence certificate
- One (1) copy of F.A./F.Sc./A Level Equivalence certificate
- Photocopy of Student's ID Card / "B. Form"
- Photocopy of Student's/ Father's/Guardian's ID Card
- All photocopies should be duly attested by a gazetted officer.

NOTE: At the time of ADMISSION following documents SHOULD be provided

- **Health Proforma duly signed by a Medical Officer of Govt. Hospital, must be attached.**
- No Form will be accepted without Health Proforma.
- Photocopies of ALL DOCUMENTS (4 Copies)
- Passport Size Photograph with white background duly attested from BACK SIDE (4Copies)

Incomplete forms will not be accepted