

## STUDENT REGISTRATION FORM

### Personal Information

Student's Name	:		
Father's / Husband's Name	:		
Student CNIC Number	:	Date of Birth	:
Home Address	:		
Telephone Number	:		
Email Address	:		

### Academic Qualifications

Academic Degree	Subjects / Group	Year Passed	Grade	School / College / University
Master's				
Graduation				
Intermediate				
Matriculation				

### Technical Qualifications & Skills

Diploma, Certification or Course	Description	Year Passed	Grade	Institute

### Professional Experience

Organization	Designation	Job Responsibilities	Joining Date	Leaving Date
Total Number of Years of Professional Experience				

Are you currently studying?  
*Institution/organization name (If yes)*

Yes  No

List your areas of Interest in the field of computers  
*( for Example : Oracle, Java, Graphics and Communications etc. )*

Student's Signature : \_\_\_\_\_

Date : \_\_\_\_\_

### FOR OFFICE USE ONLY

Student ID / Code :	Ending Date :
Course Attending :	Admission Referred by :
Timings :	Skills Key Words :
Starting Date :	

## RULES & REGULATIONS

I \_\_\_\_\_ S/o D/o. \_\_\_\_\_  
resident of \_\_\_\_\_ hereby consent wilfully to

abide by all the rules and regulations of **ConsulNet Corporation Computer Training Institute**, changed & enforced accordingly from time to time, particularly the following:

In case I am enrolled in a course, where monthly payment of fees is allowed, I agree to pay all my dues before the 10th of every calendar month. In case of the late payment, I agree to pay the applicable late fees.

I clearly understand that all payment, once made are nonrefundable as well as nontransferable.  
I shall not request/ask for the refund/transfer of fees under any circumstances.

I agree that my name may be struck off in case of nonpayment beyond period stipulated.

I Agree that if my attendance record falls below 80% without any reasonable cause acceptable to the management of **ConsulNet**, my name may be struck off.

I agree that my name may be struck off in case of my irregularity/impunctuality.

I shall be responsible for the damage of any equipment, and shall not use any software other than required for my class and practice assignments.

I understand that a professional educational organization has an environment conducive to professional attire and dressing. I agree to maintain professional dress decorum while visiting the premises of **ConsulNet**.

I shall maintain the discipline and academic atmosphere of the Institute and shall not indulge in any political or subversive activities whatsoever.

In case of any misbehavior with the teaching or management staff, other student and the neighbor etc. the management reserve the right to take any disciplinary action against me, as it may deem fit.

I understand that the venue of the class may be changed or any scheduled program class might be cancelled or the timing altered or merged with another slot, due to specific requirement of the administration of **ConsulNet**, and therefore will adjust my program according to the new schedule.

I understand that i have to read the notices for the examinations, assignments, results and such other matters displayed on the Notice Board from time to time. In case I fail the read notice displayed, I cannot hold the management responsible for my lack of information.

I understand that the management of ConsulNet is not responsible for any mishap or loss of valueables within and around the premises of the institute. Also, vehicles are parked at my own risk.

I have no objection if photographs / videos are taken of my sessions during the classes at ConsulNet Corporation for publishing on social media and in press.

Signature of Applicant . \_\_\_\_\_

Date : \_\_\_\_\_