Balochistan University of Information Technology, Engineering & Management Sciences
BUITEMS
Quality & Excellence in Education

F-13/QSP/SAA/15/01

PROFORMA FOR
"STUDENTS DEMOGRAPHIC DATA CORRECTION"

Please tick √ any one:

Correction Required

☐ **Student Name**   ☐ **Father Name**

☐ **Date of Birth**   ☐ **CNIC**

(PARTICULARS TO BE FILLED BY THE EXE-STUDENT)

1. CMS ID # : _____   2. Session : _____

3. Name: _____   4. Father's Name : _____

5. Faculty: _____   6. Program of Study: _____

7. Contact #: _____

Dated:____/____/____   _____
                                                                         Signature of Student

Signature of Chairperson: _____

Note: Please attach the following attested documents:

- **Metric Degree / SSC Certificate**   -   **01 Copy**

- **CNIC**   -   **01 Copy** (in case of CNIC Correction)

- **Correction Letter from Board or any other authority in case of Corrections (If applicable)**

FOR OFFICE USE ONLY

Application Received by: _____ on _____

Designation : _____ Signature: _____

Corrections made by: _____ on _____

Designation : _____ Signature: _____

_____
**Signature of
Assistant Registrar (SAA)**

Students & Academic Affairs Section, BUITEMS
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