SKILL DEVELOPMENT COUNCIL KARACHI

Ministry of Federal Education and Professional Training, Government of Pakistan

C-95, Block-9, Gulshan-e-Iqbal, University Road, Karachi
Phone No 99244665-70, E-mail: sdckarachi@gmx.com

EXAMINATION FORM

ANNUAL / SUPPLEMENTARY

A recent photograph (Passport size) of the candidate should be pasted in the space duly attested by the forwarding authority.

Session _____ **to** _____

Course Name _____

Institute _____

Candidate Name (in block letters)

Father's Name (in block letters)

Date of Birth - - **NIC #**

Address _____

_____

Phone _____ **Cell #** _____

E-Mail _____ **Last Examination Pass** _____

Date _____ **Signature of Candidate** _____

_____

CERTIFICATE

I hereby certify on the basis of the documents produced before me that Mr. / Miss _____

_____ S/o, D/o _____ Qualify to

appear in the examination of _____

1. The student / trainee acquire the prescribed qualification.
2. His / Her attendance in not less than 80%.

Signature of Principal / Head of the institute with seal

INSTRUCTION

Please make sure that the Examination forms must be filled in all respect and supported with the following documents otherwise form will not be accepted:

- Copy of Marks Sheet / Certificate of Matric (For Certificate Course)
- Copy of Matric Certificate and Marks Sheet / Certificate of Intermediate. (For Diploma Course / as per requirement of the course)
- 2 recent photographs (Passport size) of the candidate. Attested by Principal (one from backside and one from front side)

To be filled by the office

Reg. # _____

Roll # _____

Examination Date:

_____

Examination Centre:

_____