



Application of Extension for the Degree of

Scholar Name:	Student Number:
Email ID:	Contact Number:
Supervisor Name:	Supervisor Alloted by DPC on:
Date of Admission:	Date of Commencement of Classes:
Date of Comprehensive Examination:	Final Date of Degree Completion:
Area of Specialization:	
Research Topic:	

Duration of extension requested for months

Number of Progress reports submitted to DASE:

Briefly describe your current work status and valid reason(s) of extension:

Detailed comments by the supervisor:



Status of Fee Deposited

Challan 1 Details (Attach Copy):

Fee Deposited Date:

Challan No.:

Amount in PKR:

Challan 2 Details (Attach Copy):

Fee Deposited Date:

Challan No.:

Amount in PKR:

Challan 3 Details (Attach Copy):

Fee Deposited Date:

Challan No.:

Amount in PKR:

Challan 4 Details (Attach Copy):

Fee Deposited Date:

Challan No.:

Amount in PKR:

Extension Information (If Applicable):

Number of Extensions:

1

2

3

4

Challan 1 Details (Attach Copy):

Date Deposited:

Challan No.:

Amount in PKR:

Challan 2 Details (Attach Copy):

Date Deposited:

Challan No.:

Amount in PKR:

Challan 3 Details (Attach Copy):

Date Deposited:

Challan No.:

Amount in PKR:

Scholar Signature

Assistant Treasure IER Signature

Supervisor Signature

Approved

Not Approved

Signatures of Chairman DPC