Workshop Registration No. _____

DEPARTMENT OF STATISTICS
BAHAUDDIN ZAKARIYA UNIVERSITY, MULTAN

Registration Form for Workshop on

Writing a Research Proposal/Thesis

(11th October, 2019 (Friday): 1430-1730)

Name:																								
Father's Name:																								

Education

Highest Degree:_____

Institute Name: _____

In case of B.Z.U Graduate: ☐ Present Student ☐ Past Student

Department Name:

Program Name:

Roll Number: **Session:**

Current Semester: **University Registration #:**

Participant's Signature

Dated:

Note:
Limited Seats are Available

FOR OFFICE USE ONLY

Dated: ____ /____/2019