



# REGISTRATION FORM

## ONLINE COURSE

### Basic Chinese Language Program-V

Invoice/Form #: \_\_\_\_\_

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

Name of Student: \_\_\_\_\_

Father's Name: \_\_\_\_\_

CNIC: \_\_\_\_\_

Latest Qualification: \_\_\_\_\_

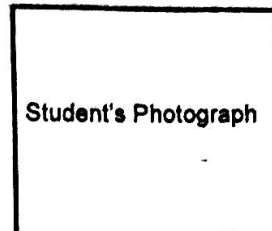
University/College/Institute: \_\_\_\_\_

Department: \_\_\_\_\_

Contact Number Home: \_\_\_\_\_ Mobile: \_\_\_\_\_

Residential Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_



Student's Photograph

#### Course Schedule

March 7, 2017 for a period of four months  
Days and Time: Tuesdays and Thursdays (2:00 pm – 4:00 pm)

\_\_\_\_\_  
Application received by (person name and signature)

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

-----For Office use only-----

Fees of the Course: Rs. 2000 (Four Months fee for video conferencing), Rs. 4000 (Four months fee for webinar)

Mode of payment (choose one): Cash  DD  PO

Deposit Slip/DD/PO No.: \_\_\_\_\_ Name of Bank & Branch: \_\_\_\_\_

Date of Deposit/Transfer into Bank: \_\_\_\_\_

Title of Account: "Specialized Skill Development Program" Account No. 010-2392-1

Name of Bank: United Bank Ltd.

Branch Code and Name: (1146), University Campus Branch, Karachi, Pakistan.

Invoice/Form #: \_\_\_\_\_

Receipt No. \_\_\_\_\_

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

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

\_\_\_\_\_  
Accounts Officer

\_\_\_\_\_  
Manager VEPP

\_\_\_\_\_  
Director ICCBS