



# National University of Sciences and Technology

## Main office Referral Form

Form No: \_\_\_\_\_

1. Student Name: \_\_\_\_\_ 2. Registration No / Batch \_\_\_\_\_  
3. Contact No: \_\_\_\_\_ 4. Email: \_\_\_\_\_  
5. Date: \_\_\_\_\_

6. State the nature of case:

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

### To be Filled by Institution

7. Application Received By: \_\_\_\_\_ Date: \_\_\_\_\_  
(To be filled by Office receiving the form at institution)

8. Action taken at Institution / Actions Requested from Main Office

9. Referred to (Specify section of Main Office) : \_\_\_\_\_

10. Officer Name: \_\_\_\_\_

11. Signature and Official Stamp: \_\_\_\_\_

12. Date: \_\_\_\_\_



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13. Remarks by Head of Institution:

Signature & Stamp of HOI: \_\_\_\_\_ Date: \_\_\_\_\_

### To be Filled by Main Office

14. Action / Comments by Main Office

15. Please check as appropriate:

- Issue resolved.  Issue will be resolved within \_\_\_\_\_ working days  
 Issue to be addressed by Institute.  Other (PI specify) \_\_\_\_\_

Signature & Stamp of Director: \_\_\_\_\_ Date: \_\_\_\_\_

#### **Instructions:**

1. Student must be in possession of this form signed by referring officer and display NUST ID Card while visiting the main office.
2. This referral form is valid for single visit within **5 working days** wef date of referral.