

TRANSPORT FACILITY REQUEST FORM

Student Name:			
			Terms & Conditions
Student CNIC:		Attach two	į.
Father/Guardian Name:		recent photographs	e. cility. lect cash.
SAP ID/ CMS# / Reg. No:			y case out fa an coll lowed
Batch: Term/Semester: _			Transport fee is not refundable and not waivable in any case. Invoice will be issued after submission of this form. Student must pay the transport fee before availing the transport facility. The same form will be used for new admission, renewal. Only designated branches and cash booths in the university can collect cash. Direct online transfer to the university bank account is not allowed. Use only KUICKPAY ID for ONLINE PAYMENT.
Department/Program:			: waiv of this wailing on, rei n the u accou
Batch: Term/Semester: Department/Program: Term/Semester: Batch: PAYMENT: PAYMENT: Piett to stipulated ben			
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Contact No: (Cell)	(Emergency)		Transport fee is not refundable and not waivable in invoice will be issued after submission of this form. Student must pay the transport fee before availing the tra The same form will be used for new admission, renewal. Only designated branches and cash booths in the universii Direct online transfer to the university bank account is no Use only KUICKPAY ID for ONLINE PAYMENT.
Bus Konte#: One Pass cannot be nied for multiple rontes One Dass cannot per nied for multiple routes ignated alline tra			
Bus Stob (Morning bick nb location) (As available on route mab): One Pass cannot be used for multiple routes Transport fee Student must part only designated only designated on location by the confine transport only designated only desig			
Riphah Lahore Campus (Drop Location): ☐ GULBERG III ☐ RAIWIND ☐ OTHER			
Bus Facility needed: From (date)	to (date)		In case of any query related to transport facility, please
No. of months to avail transport facility:Minimum duration is one semester		uration is one semester	contact at these numbers: 1. Sohail Ahmed 0300-0720831
Reason for discontinuation (if applicable): 2. Raja Asif 0316-7773977			
For Office Use Only	I hereby undertake prescribed by the Univ	•	
Amount Received: Rs		· -	
Receipt#:			
Date:	Student S	Signature:	
Issued Bus Pass#:	Date:		