# COMSATS University Islamabad
Application for Readmission
MS ☐ Ph.D.☐

| | |
|---|---|
| Student's Name: | Registration # |
| Program: | Department: |
| Campus: | Date of application: |
| Absent semester: | Semester requested for readmission: |
| Fee payment of readmission and registration receipt attached? (Yes/No): | |
| Reason for absence: | |
| I hereby request for extension in studies for consideration under CUI rules. | |

*Note: Please specify the semester and year (e.g. SP24, FA24 etc.)*

_____
**Applicant's Signature**

| | Recommendations | Name & Signature |
|---|---|---|
| **Supervisor** | ☐ Recommended  ☐ Not Recommended | Name: _____  Signature: _____ |
| **Head of the Department** | ☐ Recommended  ☐ Not Recommended | Name: _____  Signature: _____ |
| **Chairperson of the Department** | ☐ Recommended  ☐ Not Recommended | Name: _____  Signature: _____ |
| **Dean of the Faculty** | ☐ Approved  ☐ Not Approved | Name: _____  Signature: _____ |
| **Registrar CUI** | ☐ Approved  ☐ Not Approved | Name: _____  Signature: _____ |

Notified vide Notification No. _____ Dated:_____ by Office of Registrar.