

COMPREHENSIVE EXAMINATION REGISTRATION

Date:.....

ST/10/AR/10

Postgraduate Institute of Archaeology (PGIAR)

1. Student Number #. 2. Name with Initials:

3. NIC/Passport # 4. E-mail: 5. Contact phone:

6. Academic year: 7. Semester: 8. Course Fees paid: Rs.

9. Have you taken this exam before? YES | NO 8. If YES, when?

10. **Student's signature:**

For Office Use

A. PAYMENT HISTORY CHECK: Course Fees / Field Work Fees / Library Fees / Lab Fees / Field Tour Fees / Examination Fees /

AR Office Assistant

PIF stamp

Accounts Branch stamp

B. ADMISSION FORM:

Dear student, Your Comprehensive Examination will be held at PGIAR on

*Invigilator's OR
Supervisor's
signature*

1.(DATE) at(TIME) AM/PM;

AR/Academic signature: **Date:**