



KOHAT UNIVERSITY OF SCIENCE & TECHNOLOGY
EXAMINATIONS SECTION

Kohat-26000, Khyber Pakhtunkhwa, Pakistan Ph # 0922-554563-65, Fax # 554556

APPEAL FORM

PARTICULARS OF APPLICANT

(Please fill this form legibly in BLOCK LETTERS in your own handwriting)

1. Name: _____
2. Father's Name: _____
3. Name of Examination: _____
 - (i) Discipline: _____ (ii) Term: _____
 - (iii) Roll No.: _____ (iv) Class: _____
 - (v) Paper (s) : _____
4. Date of Interview for Examination Disciplinary Committee/UFM Committee: _____
5. Date of submission of Appeal application: _____
6. Examination Disciplinary Committee/UFM Committee Decision: _____

7. Reason (s) for Appeal: _____

8. Address: _____

9. Contact No.: _____

Signature: _____

Fee of Rs. (in figure) _____ (in word) _____
Deposited vide Habib Bank Ltd. KUST Branch, Kohat, receipt no. _____
Dated _____ in the designation of Director Finance, Kohat University of Science & Technology, Kohat for the purpose of Appeal.

INSTRUCTIONS

Rule: Appeal is allowed within a period of 10 days after the declaration of the decision of the Examination Disciplinary Committee/UFM Committee on Payment of Rs. 300/-. However, incase of real hardship, the Vice Chancellor may allow appeal for next 07 days after the closing dates of first

No appeal shall be entertained unless following formalities are duly satisfied:

- Form duly signed and filled
- Original Bank Fee Deposit Receipt of Rs. 300/-
- After the expiry of quoted duration of 10 days