**ADMISSION QUOTA FORM**

Following Quota seats are offered in Bahria University

1. 2% Quota for Less Development Regions (BUIC, BUKC, BULC, IPP)

2. 2% Quota for Disabled students (-----//-------- )

3. 5% Quota for Lawyers Children’s in LLB Program only (BUIC Only)

Tick ( ) against desired Quota. (Select only one option)

🞎 Less Development Regions ❑ Disabled Student ❑ Lawyers Children

**Applicant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Application No: \_\_\_\_\_\_\_\_\_\_\_\_**

**Program Applied for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Deptt: \_\_\_\_\_\_\_\_\_\_\_ Campus: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**District\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Province\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Disability Details (if any) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Note:** As per policy, following attested documents must be attached with the application:

**1. Candidates for Less Development regions:**

 a. Paid Challan form

 b. Copy of CNIC/ B-Form

 c. Copy of Domicile

 d. Certificate from respective Union Council Chairman/ District Administration

**2. Candidates for Disabled Quota Seat:**

 a. Paid Challan form

 b. Copy of CNIC (with disability logo) / B-Form

 c. Disability certificate from the national/ Provincial Council for the rehabilitation.

**3. Candidates for Lawyers Children’s Quota Seat:**

 a. Paid Challan form

 b. Copy of CNIC/ B-Form

 c. Copy of Father/Mother Pakistan Bar Council license

**IMPORTANT INSTRUCTIONS**

1. Duly filled Admission Quota Form along with supporting documents shall reach Admissions office of respective Campus by quickest means (e-mail/ TCS etc), uptill Admissions Deadline (Closing) date.
2. Applicants shall appear in the CBT on the date notified by BU, as per policy.
3. No fee waiver is authorized on quota seats.

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Applicant's Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**FOR OFFICE USE ONLY**

 Approved/Not Approved

Remarks: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_