



National University of Sciences and Technology
REPORT OF QUALIFYING EXAMINATION PART A – SUBJECT EXAM
(To be filled by Institution)

Name: _____ NUST Regn No: _____

Institution: _____ Dept: _____

1st Attempt **Date:** _____

Paper-I (Major Area) _____ Marks Obtained _____ %

Paper-II (Allied Area) _____ Marks Obtained _____ %

PASS **FAIL**

In case of failure in first attempt:- List the conditions that must be met beforehand and the

date for next Qualifying Exam-Part A: _____

Date for 2nd Attempt: _____

GEC Comments page by each member, clearly mentioning the reasons for student's failure is attached. yes No

2nd Attempt **Date:** _____

Paper-I (Major Area) _____ Marks Obtained _____ %

Paper-II (Allied Area) _____ Marks Obtained _____ %

PASS **FAIL**

Date _____

Signature of Supervisor

APPROVED

Dated: _____

Head of the Department

COUNTERSIGNED

Dated: _____

Dean/Commandant/Principal

Distribution:

01 x original copy each to Exam Branch, at Main Office NUST and in student's dossier at the School/College/Centre
01 x photocopy each to PGP Dte, Supervisor and sponsoring agency (if any).