

I																									
S/D/o																									
Registration # <span style="border: 1px solid black; padding: 0 5px;">  </span> of <span style="border: 1px solid black; padding: 0 5px;">  </span> program, have completed all degree requirements. Please issue cheque in favor* of _____ * Cheque will be issued in the name of student or parents only which must be picked up within six months of issue date, after which the cheque will be forfeited.																									
Student Cell #: <span style="border: 1px solid black; padding: 0 5px;">  </span> Email ID: _____																									
_____ Student (Sign & Date)																									
The Name & Father Name as per last degree to be verified by verifying officer																									
<b>For Office Use Only (Do not write below this line)</b>																									
<b>EDC Office</b>													<b>QEC Office</b>												
Alumni database entry made <b>gd.szabist-isb.edu.pk</b>													Graduating Survey entered <a href="https://szabist-isb.edu.pk/student-resources/#QEC">https://szabist-isb.edu.pk/student-resources/#QEC</a>												
One passport size picture for SAGA Card																									
Assistant Manager EDC (Sign & Date)													Manager QEC (Sign & Date)												
<b>Library</b>																									
No outstanding dues : _____																									
_____ Librarian (Sign & Date)																									
<b>Academics Office</b>																									
Publication's Requirements (for PhD) _____ Remarks: _____																									
_____ Controller Academics (Sign & Date)																									
<b>Computer Lab</b>																									
Lab Domain Account is disabled <input type="checkbox"/>																									
Software copyright submitted (for BS-Computing/ MCS only) <input type="checkbox"/>																									
Remarks: _____																									
_____ Lab Administrator (Sign & Date)																									
<b>Media Cage &amp; Studio</b>																									
No Outstanding Equipment <input type="checkbox"/>																									
No reimbursement/ repair required <input type="checkbox"/>																									
Zab Media Festivals (ZMF) Participation <input type="checkbox"/>																									
Remarks: _____																									
_____ Media Activity Supervisor (Sign & Date)																									
<b>Admissions Office</b>																									
GAT Score (for MS/PhD) submitted <input type="checkbox"/>																									
IBCC equivalency submitted (Batch 2014 and onwards): Yes <input type="checkbox"/> No <input type="checkbox"/>																									
HEC equivalency / verification submitted (Batch 2014 and onwards): Yes <input type="checkbox"/> No <input type="checkbox"/>																									
_____ Manager Admissions (Sign & Date)																									
<b>Finance Office</b>																									
Security Deposit													Printing & other Charges												
Other Payables													Library Dues												
													Degree & Gown Fee												
<b>Total Payable</b>													<b>Total Receivables</b>												
Payable Rs. _____ paid vide cheque number _____ dated _____																									
Receivable Rs. _____ paid vide challan number _____ dated _____																									
_____ Finance Officer (Sign & Date)																									
<b>Note: VALIDITY OF CLEARANCE DATE IS "ONE" MONTH.</b>																									
Records Office will not accept this form, if the clearance is more than a month old at the date of submission.																									
<b>Records Office</b>																									
The student has submitted the Degree Claim Form Yes <input type="checkbox"/> No <input type="checkbox"/>																									
_____ Records Department (Sign & Date)																									

**STUDENT RECEIVING (After Collection of Transcript)**

All information reported on Final Transcript and Pass Certificate is checked and does not require any corrections.

Received by: \_\_\_\_\_ Sign &amp; Date: \_\_\_\_\_

CNIC # / Student Reg. # (in case of authority letter): \_\_\_\_\_

## **MANDATORY DOCUMENTS REQUIRED TO APPLY FOR THE ISSUANCE OF FINAL TRANSCRIPT & PASS CERTIFICATE**

Attach the following Mandatory Documents:

**1. Bachelors Programs:**

Copy of Intermediate Mark Sheet (consolidated) & Certificate **OR** IBCC Equivalency with 3 A' Level Results

- *If Surname is separately reported on the previous educational document, then the student will have to fill the Undertaking Form.*

**2. Masters, MS & Ph.D Programs:**

Copy of Last Transcript (Consolidated) & Degree issued (last degree verification/Equivalency by HEC for Batch 2014 & onwards).

- *If Father's Name is not mentioned on the previous degree, then copy of previous transcript, Smart CNIC / Passport **or** any other legal Document with Father's Name correctly spelt in English is required.*
- *Student completing their Last Degree at SZABIST are "Not Required" to submit HEC Verified documents.*

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### **READ CAREFULLY**

- *Final Transcript & Pass Certificate will only be issued after all requirements for the degree are completed including the submission of all mandatory educational documents.*
- *No Change will be made on Final Transcript & Pass Certificate, once issued.*
- *Only those candidates who become eligible to receive the Final Transcript & Pass Certificate will be eligible to receive the Degree at the next convocation.*
- *In case of nominating someone else to collect the Final Transcript & Pass Certificate / Degree, the student must email authority letter to the Records Department ([records@szabist-isb.edu.pk](mailto:records@szabist-isb.edu.pk)).*
- *The nominee in order to collect documents will have to submit a copy of his / her CNIC.*
- *Final Transcript & Pass Certificate will be issued after six to eight weeks of Clearance Form submission.*
- *Degree will be issued after Convocation.*
- ***Clearance Form must be submitted at the Records Department.***

## **Mandatory Documents for Admission Office**

### **A. Graduates of Bachelors Programs:**

1. Copy of Certificate of Matriculation (SSC) or O-level (08 passes).
2. Copy of Certificate of Intermediate (HSSC) or A-level (03 passes).
3. Copy of O/A level Equivalency Certificate of IBCC.

**Note:** Bring your original Certificates/Equivalency (for the original seen).

### **B. Graduates of Masters, MS & Ph.D Programs:**

1. Copy of Bachelor's / Master's / MS degree & Final transcript.  
(Last degree must be verified by HEC from batch 2014 and onwards)
2. Copy of Equivalency from HEC (in case of foreign degree).
3. Copy of GAT-General / HAT relevant (50% score) for MS programs.
4. Copy of GAT-Subject (60% score) PhD degree.

**Note:**

- Bring your original last degree (HEC attested) and transcript, for original seen only.
- In case of foreign degree bring the equivalence certificate issued by HEC for original seen.
- The last degree from SZABIST doesn't require HEC verification.

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## **Mandatory Documents for EDC Office**

### **Internship Policy**

1. To bridge the gap between classroom and work situations, SZABIST has instituted a Mandatory minimum 6-week internship as requirement for degree completion.
2. After the internship is completed, students are required to write a report on how well the Internship enriched their learning. This report, along with the 'Internship Certificate' issued by The company and 'Internship Evaluation Form' filled by the company, is to be submitted to EDC.
3. Those who are already employed may request a waiver by submitting the 'Internship Waiver Form' with minimum 6-month employment certification and any necessary documentation at the time of degree completion. Such requests are approved on a case-to-case basis.

<b>Applicable:</b>	
<b>Not Applicable:</b>	

**EDC Office Signature:**\_\_\_\_\_

**SZABIST**

**INTERNSHIP WAIVER FORM**

(For Transcript Clearance Only)

Name \_\_\_\_\_

Reg.No. \_\_\_\_\_

Program \_\_\_\_\_ Semester/ Year: \_\_\_\_\_

Res. Phone No: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

**Work Experience (should be during the Degree period)**

Time Period: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Designation: \_\_\_\_\_

Name of HR Manager/ Supervisor: \_\_\_\_\_

Office Address: \_\_\_\_\_

Office Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Office Email: \_\_\_\_\_

\_\_\_\_\_  
Student's  
Signature & Date

**For Office Use Only (do not write below this line)**

Acceptable: ☐ Not Acceptable: ☐

\_\_\_\_\_  
Program Manager  
Signature & Date

\_\_\_\_\_  
Head of Department (HoD)  
Signature & Date

\_\_\_\_\_  
Controller Records  
Signature & Date

Student Name: <i>(In Capital words)</i>																			
Father Name: <i>(In Capital words)</i>																			
Registration No.:	_____ Program / Faculty: _____																		
Year of Admission:	_____ Date of Completion: _____																		
CGPA Obtained:	_____ Cr. Hrs. Completed: _____																		
No. of Compulsory Courses	_____ No. of Elective Courses: _____																		
No. of Extra Courses:	_____ Cell No. _____																		
Email Address:	_____																		

I hereby certify that I have completed all the required core and elective courses, and as well as the credit hours, for the program of study in which I was admitted.

I undertake that all the above information is accurate. I am aware that, in case of any incorrect information, University may take any action against me.

Date: \_\_\_\_\_ Student Signature: \_\_\_\_\_

**Note:** You must collect the Degree Claim Form as soon as you complete your degree requirement and get it signed by your relevant Program Manager, thereafter submit it to the Records office. In order to get your degree in Convocation; you must submit the Clearance Form to the Records Dept. before the deadline as announced by the Record Dept. If you fail to submit your Clearance Form by the deadline; then your degree will be conferred in Absentia. Please note that Transcript, Pass Certificate and Degree will be issued upon submission of your Clearance Form.

#### **INSTRUCTIONS FOR STUDENTS ON PAGE 2.**

#### **For Office Use only- (To be filled by the Relevant Program Manager)**

- ✦ Specialization: - For MS/CS & Ph.D/CS Batch 2014 & onwards: \_\_\_\_\_
- Specialization: - For MS-SS Batch 2018 onwards: \_\_\_\_\_
- Area of IS-I & II / IRS-I & II (for MS & Ph.D students): \_\_\_\_\_

- ✦ The student has completed the following:

- |                         | YES                      | NO                       |
|-------------------------|--------------------------|--------------------------|
| ✦ Compulsory Courses    | <input type="checkbox"/> | <input type="checkbox"/> |
| ✦ Elective Courses      | <input type="checkbox"/> | <input type="checkbox"/> |
| ✦ Required # of Credits | <input type="checkbox"/> | <input type="checkbox"/> |

- ✦ Course Replacement given for the following courses:

Compulsory Courses	Replacement Courses
1.	
2.	
3.	
4.	

Date: \_\_\_\_\_

Program Manager's Signature: \_\_\_\_\_

# **EXIT INTERVIEW OF GRADUATE**

<b>THINGS I LIKE MOST</b> <b><u>/EXPERIENCE IN SZABIST</u></b> <b>Program Manager's Remarks.</b>	
<b>Deficiencies in Program /</b> <b><u>SZABIST</u></b> <b>Program Manager's Remarks.</b>	
<b>Recommendation for</b> <b><u>Improvement</u></b> <b>Program Manager's Remarks.</b>	

Description	Topic	Area
Independent Study – I*		
Independent Study – II*		
Thesis*/Dissertation*		

\*Please attach title page of your ISs and Thesis.

\_\_\_\_\_  
Student Name and Registration No

\_\_\_\_\_  
Program Manager Sign