



SARHAD UNIVERSITY
OF SCIENCE & INFORMATION TECHNOLOGY, PESHAWAR

CONTINUING FORM

Programme : M.Ed Sp- Edu- 2nd Semester: Spring Fall Year 2 0

Reg. No.: S U C R - - - -

Roll No.: - - -

Name:

F. Name:

Address:

Tel: Mobile:

E-Mail:

Preferred District of Examination Centre:

Compulsory Course(s):

S.No	Course Name	Course Code	✓
1	Teaching Practice	MAE461	Compulsory
<i>Select research thesis or two courses</i>			
2	Research Thesis	RES480	<input type="checkbox"/>
OR			
3	Teaching Strategies	MAE447	<input type="checkbox"/>
4	Economics of Education	MAE448	<input type="checkbox"/>

Note: Select any **ONE** group of your choice from the following groups (each group contains four subjects and for subjects detail kindly check prospectus)

S.No	Group No.	Group Name	✓
1	I	Hearing Impairment	<input type="checkbox"/>
2	II	Mental Retardation	<input type="checkbox"/>
3	III	Visual Impairment	<input type="checkbox"/>
4	IV	Physical Disability	<input type="checkbox"/>

Fee Information:

Challan No: _____	Date: _____
Name of Habib Bank Branch: _____	
Amount (In Figure) Rs. _____	Amount (In Words)Rs. _____

Affix unattested
photograph

(1.5" x 2.0")

غیر تصدیق شدہ
تصویر چسپایا کریں

Signature of Applicant