



**UNIVERSITY OF SARGODHA**

ADMISSION FORM FOR REGULAR/LATE COLLEGE STUDENTS ONLY

MASTER OF EDUCATION

1st / 2nd ANNUAL EXAMINATION 20____.

Name of College: _____

امیدوار (میل / فی میل) نیارنگین پاسپورٹ
سائز فوٹو یہاں گوند سے چسپاں کریں
فوٹو کو پون یا سٹیپل کرنا منع ہے

1. Registration No. (University of Sargodha) _____

2. Name of the Candidate (In Block Letters)

_____ تام امیدوار اردو میں

3. N.I.C. No. _____

4. Father's Name (In Block Letters)

_____ والد کا نام اردو میں

تصدیق کنندگان سر اور چہرہ چھوڑ کر تصدیق کریں
امیدوار شناختی کارڈ کی فوٹو کاپی فارم کیساتھ ضرور لفٹ
کریں۔ ورنہ رول نمبر جاری نہ ہوگا

Form No. _____

5. Religion _____ 6. Sex (Male / Female) _____

7. Present Address _____

8. Permanent Address _____

9. Year of Passing the B.Ed Examination (Annual / Supplementary 20____.)

Roll No. _____ Reg. No _____ Name of the University _____

10. For Compartment / Failed as a Whole candidates only (information about the last chance availed)

Year of last appearing in M.Ed _____ Annual Exam, 20____ Under Roll No. _____
1st or 2nd

11. Encircle the Paper Number/s in which to appear in the list given below:

Course Code	Name of Course (Old Course)
1. MED601	Philosophy of Education
2. MED602	Educational Psychology & Guidance
3. MED603	History of Education
4. MED604	Educational Testing, Measurement and Assessment
5. MED605	Research Methods in Education
6. MED606	Educational Administration
7. MED607	Curriculum Development
8. MED608	Instructional Technology
Group – I	
9. MED609	Educational Law
10. MED610	Educational Planning and Financing
11. MED611	Human Resource Management
Group – II	
9. MED612	Counseling Techniques
10. MED613	Educational & Vocational Guidance
11. MED614	Assessment & Evaluation in Guidance
12. Thesis	

(New Course w.e.f Session 2014-15 onward)

Course Code	Name of Course
1. MED601	Research Methods in Education
2. MED602	Educational Planning & Management
3. MED603	Curriculum Development
4. MED604	Instruction Technology & Computer Application in Education
5. MED605	Education in Pakistan
6. MED606	Philosophy of Education
The Students may opt any two of the following optional papers or thesis carrying 200 marks	
7. MED607	Human Resource Management
8. MED608	Guidance & Counseling
9. MED609	Sociology of Education
10. MED610	Institutional Improvement
11. MED611	Human Development and Learning
12. MED612	History of Education
13. MED613	Comparative Education

Declaration:

- i) I hereby declare that the particulars mentioned above are correct and that in case of any difficulty arising out of inaccuracy therein I shall be responsible for the same.
- ii) I shall not take part in walk out or protest in any paper during the exam.

Signature of the Candidate (In English)

دستخط امیدوار اردو میں

Price: 30 Rupees

Online downloaded

UNIVERSITY OF SARGODHA**Roll No.** _____
(To be filled in by the office)**FEE RECEIPT FORM****(For Regular / Late College Students only)****Master of Education 1st Annual / 2nd Annual Examination 20____.**

1. **Name of College** _____
2. **Name of the Candidate** Block letters (In English) _____
3. Block letters (In English) _____
4. **Registration No.** University of Sargodha _____
5. Full Subjects/Compartment / Failed as a Whole. (Delete the portion which is not applicable)
6. Amount of fee paid Rs. _____ Vide Bank Challan No. _____
Dated _____ Habib Bank Ltd. Branch _____
7. **For compartment candidate.** Mention M.Ed 1st or 2nd Annual Examination 20____. **Roll No.** _____

I hereby declare that the particulars mentioned above are correct and that in case of any difficulty arising out of inaccuracy therein, I shall be responsible for the consequences.

Signatures of the candidate (In English)

NOTE:-**ORIGINAL RECIEPT OF BANK CHALLAN FOR
ADMISSION FORM MUST BE PASTED ON THE BACKSIDE OF THIS FORM.**

(بینک چالان کی اصل رسید اس فارم کی پشت پر چسپاں کریں)

MONEY ORDERS, POSTAL ORDERS, BANK DRAFTS & CHEQUES WILL NOT BE ACCEPTED**ATTESTATION CERTIFICATE**

I hereby certify that the candidate has remitted admission fee in the Habib Bank Ltd.

Branch _____ Rs. _____ vide Bank Challan No. _____

Dated _____ for the M.Ed, 1st / 2nd Annual Examination 20____.**Diary No.** _____**Dated: -** _____**Signature of the Principal
with office stamp****Roll No.** _____ (To be filled in by the office)**Roll No.** _____ (To be filled in by the office)

Name. _____ Name. _____

Father's Name _____ Father's Name. _____

Address _____ Address _____