





**COMSATS University Islamabad**  
*Sahiwal Campus*  
**Admission Entry Test Challan**  
Bank Copy

Session : \_\_\_\_\_ MS Test Challan

HABIB BANK LTD                      A/C No: 23607000000803

Branch Code \_\_\_\_\_ Date \_\_\_\_\_

Branch Name \_\_\_\_\_

Admission Form Number \_\_\_\_\_

Name \_\_\_\_\_

Father Name \_\_\_\_\_

CNIC/B,Form \_\_\_\_\_

<b>Amount Rs.</b> 1000	<b>Amount in Words: One Thousand Only</b> <i>Non Refundable/Non-Transferable</i>
---------------------------	---

\_\_\_\_\_  
 Applicant's  
 Signature

\_\_\_\_\_  
 Bank Stamp  
 Bank HBL



**COMSATS University Islamabad**  
*Sahiwal Campus*  
**Admission Entry Test Challan**  
Accounts Copy

Session : \_\_\_\_\_ MS Test Challan

HABIB BANK LTD                      A/C No: 23607000000803

Branch Code \_\_\_\_\_ Date \_\_\_\_\_

Branch Name \_\_\_\_\_

Admission Form Number \_\_\_\_\_

Name \_\_\_\_\_

Father Name \_\_\_\_\_

CNIC/B,Form \_\_\_\_\_

<b>Amount Rs.</b> 1000	<b>Amount in Words: One Thousand Only</b> <i>Non Refundable/Non-Transferable</i>
---------------------------	---

\_\_\_\_\_  
 Applicant's  
 Signature

\_\_\_\_\_  
 Bank Stamp  
 Bank HBL



**COMSATS University Islamabad**  
*Sahiwal Campus*  
**Admission Entry Test Challan**  
Admission Office Copy

Session : \_\_\_\_\_ MS Test Challan

HABIB BANK LTD                      A/C No: 23607000000803

Branch Code \_\_\_\_\_ Date \_\_\_\_\_

Branch Name \_\_\_\_\_

Admission Form Number \_\_\_\_\_

Name \_\_\_\_\_

Father Name \_\_\_\_\_

CNIC/B,Form \_\_\_\_\_

<b>Amount Rs.</b> 1000	<b>Amount in Words: One Thousand Only</b> <i>Non Refundable/Non-Transferable</i>
---------------------------	---

\_\_\_\_\_  
 Applicant's  
 Signature

\_\_\_\_\_  
 Bank Stamp  
 Bank HBL



**COMSATS University Islamabad**  
*Sahiwal Campus*  
**Admission Entry Test Challan**  
Student Copy

Session : \_\_\_\_\_ MS Test Challan

HABIB BANK LTD                      A/C No: 23607000000803

Branch Code \_\_\_\_\_ Date \_\_\_\_\_

Branch Name \_\_\_\_\_

Admission Form Number \_\_\_\_\_

Name \_\_\_\_\_

Father Name \_\_\_\_\_

CNIC/B,Form \_\_\_\_\_

<b>Amount Rs.</b> 1000	<b>Amount in Words: One Thousand Only</b> <i>Non Refundable/Non-Transferable</i>
---------------------------	---

\_\_\_\_\_  
 Applicant's  
 Signature

\_\_\_\_\_  
 Bank Stamp  
 Bank HBL