



**UNIVERSITY OF TECHNOLOGY  
NOWSHERA**  
(SHUHADA-E-APS, UOT)

**DEPARTMENT OF INFORMATION ENGINEERING TECHNOLOGY**

**Application Form for**  
**Experience Certificate**

**STUDENT'S PROFILE / DETAILS:**

Student's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_

Registration No: \_\_\_\_\_ (Please write in format: NSR/18/IT/020)

CNIC: \_\_\_\_\_

Internship Start Date : Day \_\_\_\_\_ Month: \_\_\_\_\_ Year \_\_\_\_\_

Internship End Date : Day \_\_\_\_\_ Month: \_\_\_\_\_ Year \_\_\_\_\_

Total Weeks of Internship at UoT: \_\_\_\_\_

Job Title: \_\_\_\_\_

Section: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

Date of application submission: \_\_\_\_\_

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**Supervisor Remarks (completed/Not Completed):** \_\_\_\_\_

**Supervisor signature and Stamp:** \_\_\_\_\_

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**HoD Remarks:** \_\_\_\_\_