

Virtual University of Pakistan APPLICATION FORM FOR EXISTING INSTITUTIONS

Institute's	Name (Blo	ck Letters):						
Owner's N	Name(s):							
	andmark(s):							
City:		P1	rovince:					
Tel. No.:		N	lobile:		_E-Mail: _			
Institute T		т	XX7 1		D ·			
Timings Opening Closing	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
Building S	Status:	1. Owned		2. Rented			<u> </u>	
If Rented:	Building O	wner's Nar	ne:		CNI	C:		
Status of I	nstitute:	1. Private	2. P	ublic	3. Othe	er (Pls. spec	ify)	-
the establi		new Privat	te Virtual Ca	ampus. I fur	ther agree t	to observe th	VU website regard he rules framed by	
Applicant	's Name:							
Father's N	lame:							
CNIC:								
Qualification:						ssion:		
Signature	& Stamp: _							

Check List

Please ensure that you have attached the following information / documents with the Application Form:

1	Attested copy of the Applicant's Computerized National Identity Card	
2	Proposed geographical market (catchments area)	
3	Demographics of the city / area	
4	Number of intermediate & degree colleges in the area	
5	Potential of the area in terms of student base	
6	Anticipated student growth in the next five years at your proposed campus	
7	Total & covered area of the proposed premises	
8	Floor plan of the proposed building	
9	Photographs of the interior and exterior of the building	
10	Map of the location clearly showing the approach, building location and nearby landmarks	
11	Bank Draft/ Pay Order of Rs. 10,000/- (Non-refundable fee) in favor of " Virtual University of Pakistan"	

Mailing Address:

PVC Office,
Virtual University of Pakistan,
M.A. Jinnah Campus, Defence Road off Raiwind Road, Lahore.
Ph : 0423/111-880-880 Ext. No. 711
Email: campus_applications@vu.edu.pk