

### INTERNATIONAL ISLAMIC UNIVERSITY, ISLAMABAD

#### Office of the Students' Adviser

Phone: 9019580-9257965

NO-SAC/2017-IIU-

#### Subject: -Summer Camp Registration for the Male Students

I am pleased to inform you that International Islamic University, Islamabad is going to arrange its first Summer Camp-2017 starting from 10th July, 2017 to 20th August, 2017 (i.e. 40 days at the University (IIUI)

The purpose of the camp is to enhance students' personal as well as professional development in all the spheres of life so that they will be able to achieve their ambitious/goals effectively and efficiently.

#### Following activities will be a part of the camp:

- i. Dawah & Tarbiah Classes
- Cultural Activities ii.
- iii. Sports & Adventures Activities
- iv. Recreational Trips
- Counseling Sessions V.
- Lectures, Seminar & Workshop Series vi.
- vii. Leisure Time Events
- Aesthetic Events etc. viii.

Students will be short listed on the basis of academic background as well as their positively participation in extra-curricular activities at all levels. Registration fee would be payable only by the short listed students is Rs. 1000/- (Refundable)

Interested Students are hereby informed that Registration form will be available in the Office of the Students Adviser, Room # A-013, Faculty Block-I (Ph: 9019580). The said form will be submitted through respective departments. Last date of registration is 22 June, 2017.

(Registration form is also available on university website)

(Dr. Abdul Qadir Haroon)

Addl. Students' Adviser /

Member/Secretary, Summer Camp-2017 Committee

Form no:



## INTERNATIONAL ISLAMIC UNIVERSITY, ISLAMABAD

Office of the Students' Adviser Room # A-13, Faculty Block-I, H-10 Campus Phone: 9019580, 9257965

Attach 01 Photos 1\*1

# Registration Form for Summer Camp-2017 (July 10 to August 20)

Name:			F	ather's	Na	me:	
CNIC No:							
Present Address:		ee saids					
Permanent Address:							
Cell No:	Contac	et No. (I	n cas	e of en	erge	ency	y):
Department:					Fa	acul	ty:
Semester:	Semester: Reg. No:						CGPA
hereby solemnly declared that  1. I will attend the summer  2. I will not quit the summer  Applicant's signature:  tudents' verification must be requ	camp reguler camp at a	larly any stag	e and	compl	ete i	t wi	th my fully devotion.  Date:
Sign & Stamp):			0.3				AND RESPONDENCE OF THE CONTROL OF THE SECOND STATE OF THE SECOND
Recommendation of the Concern	ned:						
Chairman/HOD:						Date:	
For office use only:							
Received by:							Receipt#
Signature:	Signature:						Dated: