

PERSON TO BE NOTIFY INCASE OF EMERGENCY

Name: _____ Relationship _____ Tel. _____

Address: _____

(Signature)

(Date)

Education Background

12. Name of Institutes attended in chronological order, including any, you may be attending at present. Attach Photocopies of Certificates and mark sheets of last attended.

Name of Institute / Board	Registration No	Year Attended		Grade / Division	Name of Certificate. Degree
		From	To		

STATEMENT OF GUARANTOR

Name: _____ Relationship _____ Tel. _____

Address: _____

I undertake to pay all the expenses of _____ for his/her at the SMA Rizvi Textile Institute. Institute reserves the right to review its tuition and other fees annually to cover inflation and other costs.

(Guarantor's Signature)

(Date)

PERSON TO BE NOMINATED BY COMPANY

Name of Company: _____ Designation. _____

Company Address and Telephone No: _____

(Signature of Partner/ Proprietor/General Manager)

(Date)

17. How did you know about this Institute?

18. Work Experience, if any:

19. Extracurricular Activities:

Activity	Position Hold or Honor Won

Plot No. 231, Sector 23, Road 10,000 Korangi Industrial Area, Karachi.
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E-mail query@smarti.edu.pk