

Name of Coordinator: ___

The Institute of Management Sciences, Lahore

IMS Credit Transfer

D '	ID #						
			me:Program:				
	s.Completed:CGPA:						
Curre	nt ID #N	ame:	Program:				
Email	:	Cell No	_				
Cours	se(s) applied for transfer:					Credit	
	Courses studied at t	he IMS	Equivalent Coursesat IMS		1	Given	
r.N o.	Course Title	Grade Cr.H	Course Code	CourseTitle	Cr. Hrs.	Yes / No	
•		(FOR OF	FICE USE ONLY		•		
No. of	f Credit Hours to be transferred:	•		urse(s)to be transferred:			
Total	No. of Credit Hours required: _	Prepared b	y	:			
Program Coordinator:		Signature: _	gnature:Dated:				
Appro	oval of Head of Department:	Signature: _	gnature:Dated:				
Appro	oval of Dean:	Signature: _	gnature:Dated:				
Appro	oval of Registrar:	Signature: _	nature:Dated:				
Appro	oval of Assistant Controller of	Examinations:					
	e Displayed: Yes/No elines for Credit Transfer: The Credit Transfer Policy ap recognizedUniversity/DAI.	_		Dated:not completed any degree p		any HEC	
> >	Concern HoD shall ensure that Bachelors from HEC recognized approved by the Dean on the recognized exemption shall be counted in the counter of the counter	University/DAI for who commendation of the code towards the complesserred.	ich credit transfer concerned HoD an tion of degree req	is being sought. The request for different states of the different states of the word 'Exempter states of the word 'Exempter states of the word 'Exempter states of the word states of t	or credit transi ed' shall be wri	er shall be	
	The	Institute of Mar		ences, Lahore			
	owledgement Receipt: Credit ster:			Date:			
	ent's Name:			Date.			

Signature of Coordinator: ___