



Capital University of Science & Technology
Directorate of Volunteers in Service
Islamabad Expressway, Kahuta Road,
Zone-V, Islamabad – Pakistan



Registration Form

- 1) Name _____ Registration No _____
- a) Contact # _____ Email _____
- b) Semester _____
- 2) Faculty _____
- a) Coordinator Name & Number _____
- b) Department _____
- 3) Address _____

----- For Office Use -----

Placement, Organization/ Locality

Starting date: _____

Departmental Coordinator

Manager VIS

Director VIS

VIS No _____