



UNIVERSITY OF SUFISM AND MODERN SCIENCES
BHITSAH

Internet Access Account Request Form

Name : (CAPITAL LETTERS)	
Father's Name	
CNIC #:	
E-Mail Address:	
Job Title (for Employees):	
Roll No. (for Students):	
Department:	
Mobile Number:	
Date of Submission & Sign	

Note:-

- 1. Students are required to attach the copy of USMS-ID card along with this form. Enrollment card or admission letter are also acceptable in place of the ID card.*
- 2. Internet Access Account will be communicated to the concerned via E-mail Address.*

Office use only

Internet Access User Id: _____

Category :- _____

Date of Issue Account: _____

Focal Person (PERN-Services)
USMS-BHITSAH

Director IT
USMS-BHITSAH