



THE WOMEN UNIVERSITY MULTAN

Request for Official Turnitin Account

NOTE: Fill out the form properly and submit to **Turnitin Focal Person (Programmer I.T)**

Personal Information (All the information must be in uppercase letters.)

Salutation: Dr. Mrs. Mr. Ms. _____
Full Name: _____
Father's Name: _____
Contact No. _____
Current Email: _____

University Affiliation:

Category: Student (Post Graduate Under Graduate) Faculty Staff
Degree Program: _____ Designation: _____
Discipline/Department: _____ Department: _____
Student Reg. No. _____ Employee ID No. _____

Acceptance of the Terms & Conditions

I hereby agree to the university terms and conditions and would NOT use the official Turnitin Account for any sort of other unlawful activities.

Note: **Attach Details of Research students under your supervision.**

For Applicant/Department Use

Applicant Signature: _____ Application Date: _____

HOD/Dean/Chairmen/Director: _____
Signature / Stamp

For Official Use Only

Authorized Signature: _____ Approval Date: _____