



**UNIVERSITY OF VETERINARY AND ANIMAL SCIENCES, LAHORE**  
**APPLICATION FORM FOR MSDN SOFTWARE ACTIVATION**

Dated: \_\_\_\_\_

1. UVAS ID: \_\_\_\_\_
2. Category:            Student             Faculty             Administration
3. First Name \_\_\_\_\_
4. Last Name \_\_\_\_\_
5. Faculty/Department \_\_\_\_\_
6. If Student Degree: \_\_\_\_\_ Semester: \_\_\_\_\_
7. Present Address \_\_\_\_\_
8. Phone Number \_\_\_\_\_
9. Email \_\_\_\_\_

Please enroll me as a user of the MSDN Software Center. I, hereby, agree to abide by the rules and regulations of the University general terms & conditions for the use of MSDN Software Center which are available at our website: <http://www.uvas.edu.pk>

10. Signature of Applicant \_\_\_\_\_
11. Dean/Chairman/Head of Department Signature & Stamp \_\_\_\_\_
12. Director I.T. Signature & Stamp \_\_\_\_\_

**Note: All Fields are required.**  
**Please Attached UVAS ID card Copy.**