



Government College Women University Sialkot

Request for Official Turnitin Account

NOTE: Fill out the form properly and submit to **Turnitin Focal Person (Sehar Qayyum)**

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

Salutation: Dr. Mrs. Mr. Ms.

First Name: _____

Last Name: _____

Contact No. _____

Official Email: _____

University Affiliation:

Category: Student (Post Graduate Under Graduate) Faculty Staff

Degree Program: _____ Designation: _____

Discipline/Department: _____ Department: _____

Student Reg. No. _____ HOD Signature _____

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: _____
Signature / Stamp

For Official Use Only

Focal person Signature: _____ Approval Date: _____