



## Application Form for NUMS Turnitin Account Access

(Only for Faculty Members of NUMS constituent college/ institute)

| To be filled by applicant                                      |  |
|--|--|
| Name of constituent institute/ college                         |  |
| Name and Designation of Faculty member                         |  |
| Department of Faculty Member                                   |  |
| Official Email Address   |  |
| Phone office   |  |
| Mobile   |  |
| No of PhD/ MPhil students supervised and currently supervising |  |

\_\_\_\_\_  
Signature & stamp of HoD

**COUNTER SIGNED**

\_\_\_\_\_  
The Principal/ Dean/ Comdt of Constituent College / Institute