

# SHAHEED ZULFIQAR ALI BHUTTO MEDICAL UNIVERSITY



### ADMISSION FORM

(SESSION \_\_\_\_)

Please affix 3 Photographs attested form backside. (4x)

			backside. (4x)
MD	MS	MDS	M.Phil
<u>Instruction</u>			
Use CAPITAL Letters	and write your details	exactly they appear in you	ur documents.
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3. Cutting /Over writin	•		
4. Candidates found to	have made false or inc	orrect Statements in the f	form are liable to expulsion.
Proposed Program of St	<u>udy</u>		
Department/ Specialit	:у		
Field of Research inte	rest		
Applicant's Personal Inf	<u>Cormation</u>		
1. Full Name (First, Midd	lle, Last)		
2. Father's Name (First, I	Middle, Last)		
3. CNIC No.			
4. Date of Birth (DD/MM	1/YYYY)	<del></del>	
5. Gender	<u></u>	6. Marital Status	
Male	emale	Single	Married
7. Nationality			
8. PM&DC Registration N	No.		
9. Email	_		
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Research Paper /PMDC recognized medical journal																		
Title					Author													
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#### **Declaration and Signature**

I solemnly declare that:

- I have neither joined nor shall join any other Institute / Department / Center / College during the course of my studies at SZABMU, Islamabad I am not suffering from any infectious disease.
- I understand that the University may vary or reverse any decision made on the basis of incorrect or incomplete information which I have provided.
- I have read and understood the University's cancellation and refund policy.
- I understand that the University may obtain official records from any educational institution have previously attended.
- I will not do private practice during my training program.

#### I, Undertake:

- Abide by the Statutes, regulations (including the Code of Honor of Students, of University and rules etc. framed by the University or the Department from me to me and shall be liable any penalty including rustication /expulsion, in case of viola on of my part.
- Not to "indulge in politics", and incase, I violate this undertaking and "indulge in politics" after my admission by the University, I shall be liable to expulsion without any notice under the order of the Vice-Chancellor which order shall be final and can be questioned only before the Supreme Court of Pakistan vide judgment/order of the Supreme Court of Pakistan dated 01 July 1992.
- I accept as binding on me as long as I am a student, all rules and regulations in force at the time of joining and which might be framed subsequently.
- Show good behavior towards faculty, colleagues and patients
- Devote whole-heartedly to my studies and maintain the dignity and prestige of the University both in and outside the Campuses; Pay in me all dues and fine, if any;
- I will no y the new address to Assistant Registrar, DPCC, if there is any change in my contact address/phone number.
- I undertake to take examination un-conditionally notified by the University/Department/Institute/Centre/College.
- I have read the relevant rules and regulations concerning admission before signing this
  application, any change in Rules & Regula on of the any Program along with any change in fee
  would be applicable to all students and there would be no discretion available to any student to
  tag it old or new scheme.

Signature	Date

## **Check List**

	Original Pay Order/ Bank Challan (Rs. 2000/)							
	Answered all relevant fields.							
	Enclosed an NOC from current employer (No Objection Certificate)							
	Enclosed Experience certificate from employer.							
	Enclosed attested copies of:							
	Matriculation / O Level							
	Intermediate / A Level							
	DMCs of all MBBS/BDS professional examinations.							
	MBBS/BDS Degree							
	Attempt Certificate of MBBS/BDS							
	House Job Certificate (One Year)							
	MS/ MD/ MDS/ FCPS (Part-I) Pass certificate where applicable							
	FCPS Part II (Paediatric Medicine) Passing Certificate							
	RTMC Certificate							
	CNIC.							
	Domicile certificate.							
	Three photographs in blue background.							
	Valid PM&DC Registration							
	Copy of Publication (If any)							
For office use only								
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