

AKHTAR SAEED MEDICAL & DENTAL COLLEGE, BAHRIA TOWN, LAHORE.

APPLICATION FOR ADMISSION OF THE FIRST YEAR MBBS

Category:

Foreign Student	Overseas Pakistani Student	Local
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For Office Use Only
F.Sc./Equivalent Exam Marks: _____
Entry Test Marks / Sat II Score : _____
Aptitude Test Marks: _____
Combined Score (%age): _____
Admit Card No. _____

Paste One Passport Size Photograph
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1. Full Name (Capital letters)

Mr. / Miss. / Mrs. _____

2. Date of Birth _____ **Place of Birth** _____ **Religion** _____

3. Student Contact No. _____ **Student e-mail address:** _____

4. NIC / NICOP No. of Student:

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5. Father's Name (Capital letters)

Mr. _____

6. Father's Occupation: _____

7. Father's annual income from all source: _____

8. Father's Phone Numbers. Mob: _____ **Home:** _____ **Office:** _____

9. Permanent Home Address: (For Correspondence): _____

10. Father's e-mail address : _____

11. Passport/NIC/NICOP No. of Father:

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12. (In case of death of the father or both parents)

Guardian's Name (Capital letters)

Mr/Mrs. _____

Guardian's NIC No.

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A. Guardian's exact relationship with the applicant: _____

B. Guardian's Occupation _____

C. Guardian's annual income from all sources: _____

D. Permanent Address: _____

E. Guardian's Phone Numbers. Mob: _____ Home: _____ Office/Work: _____

F. Guardian's e-mail address _____

13. Qualifications of the applicant

Sr. No.	Examination Passed	Board From Which Passed	Roll No.	Year of Passing	Name of School/ College	Marks Obtained
(i)	Matriculation / Equivalent					
(ii)	Intermediate (F.Sc.) Pre-Medical/ Equivalent					
(iii)	Entry Test/Sat II Score					

14. Solemn affirmation by the applicant and his father/guardian

We solemnly affirm that information given above is correct to the best of my knowledge. If it is found that any of the statements was false, the applicant will lose the right of admission and, if admitted, the college will have the right to expel me. The applicant will also be liable to any further departmental or legal action that the AMDC Lahore may deem fit to take.

Father/Guardian's Signature

Signature of Student

Check List:

Date _____

Make sure that you have deposited the attested photocopies of following documents with the admission form:

1. National identity Card / Form B / Passport
2. Matriculation or Equivalent qualification Certificate
3. F.S.C (Pre-Medical) or equivalent qualification Certificate
4. UHS Entry Test/Alternative test result.
5. Three passport size colour photograph of the applicant.
6. Character certificate from head of institution last attended
7. Medical fitness certificate from any registered medical practitioner
8. Serological status about hepatitis B virus & Hepatitis C virus
9. HIV Status (for foreign students only)