

To:

OFFICE OF THE VICE CHANCELLOR,
FAISALABAD MEDICAL UNIVERSITY,
FAISALABAD.
PHONE NO. 9210080
FAX NO. 9210081
NO. /
DATED. FMU/2018.
/2018.

SUBJECT:- PROVISIONAL ADMISSION INTO 1ST YEAR BDS CLASS SESSION 2018-2019.

You have been selected provisionally for admission to the 1st year BDS class of this University on open merit seat for the Session 2018-2019.

The University Administration heartily congratulates you for your achievement. Please report to the University for medical examination and other admission process on 08.12.2018 at 08:00 a.m. You will have to deposit the following documents in original alongwith University Fee:-

1. Matriculation, F.Sc. Certificates (not result Card), Domicile Certificate, Entry Test Result Card & Character/Provisional Certificate.
2. Board Migration Certificate (whose done their F.Sc. from Federal Board or other than Punjab Province)
3. Ten passport size photographs & Six attested photostat copies of all original documents. 4 copies of NIC. Candidate & Father / guardian). Two Fancy File Cover for original documents.
4. Apart from this, all the rules and regulations mentioned in the Prospectus are applicable to you and you have to abide by the same.
5. Vaccinated certificate against Hepatitis B Virus.
6. (a) University fee Rs:-30000/- (b) Hostel Fee Rs.36640/- (c) Mess Security Rs.1500/-(refundable)
(d) Female Boarder students will provide 4 visitors names with copy of NIC & their photographs.
7. Four envelops with stamps of Rs.200/- (Size 5" X12")
8. At the time of admission, every student should submit a Surety Bond (Specimen Attached).
9. All the enclosed forms i.e. UHS Registration Form/PMDC Registration Form and student Bio data Form must be completed in all respect.
10. Verification Folder i.e. 2 copies of each Matric, F.Sc. and Domicile Certificates and past a photograph on each page with fee at the time of admission.

Your admission is subject to:-

1. Verification of F.Sc. certificates.
2. Correction/deletion/modification/addition/alteration.

Your admission may be cancelled at any time during the course of study if any document, certificate or statement submitted by you is found incorrect/bogus in any way at any stage. The admission is also liable to be cancelled if any error or omission is detected at any stage later on.

Acceptance of form/fee will be subject to the above and by itself will confer no right contrary to the above. In case you are not willing to accept this offer, please send your reply in writing in this office with in the target date mentioned above. In which case, the next candidate on merit may be admitted in your place. **The regular classes shall start from _____.** Please bring this call letter with you at the time of interview.

COLLEGE UNIFORM. White long coat (cotton) is compulsory for both male and female students during university time in lectures and practical classes. Jeans, Joggers, T-Shirt and Skirt are strictly prohibited.

| | MALE | FEMALE |
|--------|---|--|
| WINTER | White Shirt and silver gray trousers or white Shalwar Kameez. Black shoes and socks. Maroon neck tie and Maroon Blazer with college monogram. | White Kameez and Shalwar. Black shoes and socks Maroon Dupata and maroon blazer with college monogram. |
| SUMMER | White shirt and silver gray trousers or white shalwar kameez. Black shoes and socks Maroon neck tie. | White Kameez and Shalwar. Black shoes and socks Maroon Dupata. |

You are also directed to keep with you at least 30 copies of each certificate before depositing. The original documents, deposit to this University will be considered Government Property and only be returned after graduation.

(Prof.Dr.Zafar Ali Choudhry)
Vice Chancellor,
Faisalabad Medical University,
Faisalabad.

FAISALABAD MEDICAL UNIVERSITY, FAISALABAD

ADMISSION OF FIRST YEAR BDS CLASS FOR THE SESSION 2018-2019

Name of the Candidate: Mr./Miss _____

Father's Name: _____

Roll No: _____ Merit No. _____ F.Sc. Marks _____ /1100

Entry Test _____ /1100. Actual date of joining _____.

REPORT OF MEDICAL BOARD

| Examination | Report | Signatures |
|-------------------------------------|---------------|-------------------|
| 1.Surgical | | |
| 2.Medical | | |
| 3.Vision | | |
| 4.Ex-Ray or Screening Chest. | | |

REPORT OF SCRUTINY COMMITTEE:

We checked all the documents/admission application of the candidate and found correct in all respect. Admit Provisionally.

| Members | Signature |
|----------------|------------------|
| | |
| | |
| | |

**CHAIRMAN
SCRUTINY COMMITTEE
FAISALABAD MEDICAL UNIVERSITY, FAISALABAD**

STUDENT BIODATA

Roll No. _____ Class _____

Date of Birth _____ District of Birth _____

Date of joining _____

CNIC No. _____

Photograph

Name _____ Blood Group. _____
(according to matriculation certificate)

Student Cell No.1. _____ 2. _____

Father's Name: _____

Father's Phone/Cell Nos.1. _____ 2. _____

Father's Occupation: _____

Domicile _____ Religion _____ Caste _____

Marks Obtained in F.Sc: _____ /1100.F.Sc.Roll No. _____

Year of Passing _____ Board of F.Sc. _____

Registration No. _____ College: _____

Postal Address: _____

Permanent Address: _____

Father/Guardian's annual income from all sources _____

In case of guardian, mention name, relation and address: _____

Postal Address/phone at which immediate contact could be made: _____

I HEREBY CERTIFY THAT ENTIRE ON THIS FORM ARE CORRECT
TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Dated: _____.

Signature of Candidate



UNIVERSITY OF HEALTH SCIENCES, LAHORE

University Registration Return 20_____, Course: _____

College / Institution / Department _____

(To reach the Office of the Registrar within Thirty days of admission)

Paste here one ID
card size
Photograph

| | | | | | | | | | | | | | |
|--|-------------------------|-------------------|--|--|--|------------------|--|--|--|------------|--|--|--|
| Date of Entry to the Course <small>(If student upgraded/ migrated from other college)</small> | 1 | | | | | | | | | | | | |
| Date of Entry to the College <small>(In case of fresh admission in the course)</small> | 2 | | | | | | | | | | | | |
| Class Roll No. | 3 | | | | | | | | | | | | |
| Student's Name <small>(Name & Spelling according to Matriculation Certificate / Equivalent)</small> | 4 | | | | | | | | | | | | |
| Student CNIC Number | 5 | | | | | | | | | | | | |
| Father's Name <small>(Name & Spelling according to Matriculation Certificate / Equivalent)</small> | 6 | | | | | | | | | | | | |
| Father's CNIC Number | 7 | | | | | | | | | | | | |
| Date of Birth <small>(DD MM YYYY)</small> | 8 | | | | | | | | | | | | |
| Examinations Passed Matriculation, Intermediate etc. | Exam 9 | Matric/Equivalent | | | | Inter/Equivalent | | | | Entry Test | | | |
| | Roll No. 10 | | | | | | | | | | | | |
| | Year 11 | | | | | | | | | | | | |
| | Registration No. 12 | | | | | | | | | | | | |
| | Marks 13 | | | | | | | | | | | | |
| | Board/ University 14 | | | | | | | | | | | | |
| Name of the last attended Board / University <small>(Original NOC to be attached If migrating from other Board / University)</small> | 15 | | | | | | | | | | | | |
| Category of Seats <small>(Open Merit, Foreign or any other reserved seat.)</small> | 16 | | | | | | | | | | | | |
| Nationality/ Domicile District <small>(Nationality in case of foreign student)</small> | 17 | | | | | | | | | | | | |
| Permanent Address | 18 | | | | | | | | | | | | |
| Telephonic Contact | 19 | | | | | | | | | | | | |

Note:

* Attach One I.D. Card Size Photographs of the candidate with sky blue background attested on the back.

**The documents to be attached in following order;
1) Entry test result. 2) Matriculations. 3) Intermediate. 4) NOC /Migration certificate if applicable.

Principal / Dean/ Head
College / Institution/ Department
Date:

REGULATIONS RELATING TO REGISTRATION OF STUDENTS

1. The Principal / Dean/ Head of all Colleges/Institutions/Departments shall submit the Registration Return of student alongwith following academic record and Registration Fee at prescribed rates to the Registrar within Thirty Days of admission.
 - a) Attested copy of Matric/ equivalent certificate.
 - b) Attested copy of Inter / equivalent certificate.
 - c) Attested copy of Entry Test Result. (Where applicable)
2. The College/Institution/Department is liable to pay fine @Rs.100/- per week if the Registration Return is not submitted within due date.
3. The Registration Return should be carefully filled in and typed. The hand written and incomplete return shall not be acceptable.
4. The Return Form, photocopies of Academic Record and Photographs must be attested by the Principal/ Dean/ Head or his/ her duly authorized nominee.
5. In case of a student migrating from any other University/ Board (other than Punjab Province), Migration Certificate / N.O.C in original should also be submitted.
6. If any student is struck off from the rolls of a College/Institution/ Department, migrates/shifts to another College/ Institution/ Department, rusticated or expelled, or is readmitted such facts shall be reported to the Registrar within Seven Days.
7. In case of a student already registered with University, getting admission to another course at the same / another College/Institution/Department, the Principal / Dean /Head of the College/Institution/ Department shall forward a fresh registration return dully filled from all respects quoting the registration number of such student along with the prescribed registration fee for the course.

SURETY BOND
specimen
ON THE STAMP PAPER WORTH RS.50

I, _____ S/o,D/o _____

CNIC No. _____ Resident of _____

hereby submitted that I shall liable to pay Rupees three million (Rs.30,00,000) in case fail to fulfill the requirements of the Government i.e. to serve the Government of the Punjab, Health Department as "Probationary Medical Officer/Woman Medical Officer" in the Primary healthcare facilities for a period of one year after completing the foundation year/House Job as mentioned in the Prospectus.

SIGNATURES OF THE CANDIDATE

1.Name & Address: _____

I.D.Card No. _____

SIGNATURE OF THE FATHER/GARDIAN

Name & address: _____

I.D.Card No. _____

SIGNATURES OF WITNESSES

2.Name & Address: _____

I.D.Card No. _____

Signature of the witnesses

Name & Address: _____

I.D.Card No. _____

جو چیزیں لے کر آنی ہیں

- 1 ٹرنک/سوٹ کیس جسے لاک کیا جاسکے
- 2 کمبل/الحاف وغیرہ (گدا چارپائی کیلئے)
- 3 برتن 02 سے 03 عام استعمال کے
- 4 استری، الیکٹرک کیٹل، الارم گھڑی
- 5 فوم والا میٹر لیس/گدا

جو چیزیں نہیں لانی/منع ہیں

- 1 مائیکرو ویو اوون، الیکٹرک ہیٹر، الیکٹرک راڈ
- 2 قیمتی اشیاء جیولری/زیادہ رقم وغیرہ
- 3 سیف/الماری

SURETY BOND
specimen
ON THE STAMP PAPER WORTH RS.50

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