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	(Office use only)



UNIVERSITY OF HEALTH SCIENCES Lahore

Khayaban-e-Jamia Punjab, Lahore Phone No (Off) 042-99230395 (6 lines), EXT 321

Admission Form for Master of Dental Surgery Program (Old Scheme)

NOTE:

- The form shall be submitted to the Office of the Controller of Examinations.
- The name/spelling of the candidate and his/her father name be correctly written on this form, exactly as per the Matric/Equivalence Certificate, because, the same spelling /name will be finally printed on the Degree issued to you by the University.
- Please fill in the form with black ink only in CAPITAL letters and avoid contact with the edges of the boxes. A box may be left empty wherever a word ends and a new word begins in the same line or where nothing further is to be written.
- Avoid any over-writing and other mistakes while filling in the form. Please make sure the form is filled in as
- Admission form shall be filled in legibly and correctly by the candidate in his/her own handwriting. Incomplete and incorrect admission form may be cancelled. The University shall not take any responsibility for the consequences.

Please affix photograph here attestation from front (3X3 cm) with blue background

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12	Subjects in which to be examined:	
	i) Principle and Practice of Dentistry	
	ii) Special Subjects:	
13	Fee Paid Rs:	Bank Receipt
	(DD / MM / NOTE: Attach original Bank Draft/Bank Receipt with this form	YYYY)
14	Documents to be attached: I have attached attested copies of the following documents with this form (tick appropriate box) Degree of MBBS House job certificate 03 photographs size (3x3 cm) attested from front side paste at given place and 01 photograph size (3x3 cm) (attested from back side) attach with admission Form.	
15	CERTIFICATE BY THE APPLICANT I hereby solemnly declare that : (1) the information provided and statement made correct to the best of my knowledge and belief and nothing material has been concealed or responsible if my application form is rejected for any errors, wrong or incomplete entries may applying for examination without being eligible for it is a crime punishable under the act university has every right to cancel my result.	or withheld herein. (2) I shall be ade by me. (3) I understand that
	Date:	Signature of the applicant
16	CERTIFICATE BY THE DEAN/PRINCIPAL I certify that the candidate is eligible in all respects as per Rules & Regulation Sciences, Lahore to appear in this examination.	of PMDC & University of Healt
	Dated:	Signature of Principal/Dean (with official stamp/Seal)



UNIVERSITY OF HEALTH SCIENCES Lahore

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(FOR SUPERINTENDENT)	
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Father's Name:	Please Paste photograph here
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UNIVERSITY OF HEALTH SCIENCES Lahore ROLL NO SLIP (FOR CANDIDATE, TO BE HANDED OVER TO THE SUPERINTE Examination: Name: Father's Name:	Roll No : (Office use only ENDENT) Please Paste photograph here

Note: Cell/Mobile Phones, Palm Tops, Minicomputers and any other electronic equipment likely to help the candidates are completely prohibited in the Examination centers. Moreover Cell/Mobile Phones <u>shall not be collected</u> by the centre superintendent or University administration at examination centre.

Signature of the Candidate