Roll	No:			



UNIVERSITY OF HEALTH SCIENCES, Lahore

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

ADMISSION FORM FOR M. Sc. BIOMEDICAL ENGINEERING PROGRAM

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 Please affix photograph here 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 attestation from front of the boxes. A box may be left empty wherever a word ends and a new word begins in the (3X3 cm) with blue background 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 neatly as possible. 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. Wherever small choice field boxes "\sum " are provided in the form, the box adjacent to the appropriate answer is to be ticked or crossed. \checkmark or \checkmark Admission form for Master of Biomedical Engineering: APPLICANT'S PERSONAL INFORMATION Full Name (first, middle, last) Father's Name (first, middle, last) Applicant's NIC Name of Institution Registration Number S Passing M.Sc (BME) First Year Annual Supplementary Held in ----- Year ----- Under Roll No ---(for 2nd Year) Mailing Address (mention all relevant information like post code etc.)

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Mobile/ Telephone Number (with city code)

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UNIVERSITY OF HEALTH SCIENCES Lahore

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Signature of the Candidate