	UNIVERSITY OF HEALTH SCIENCES LAHORE Khayaban-e-Jamia Punjab, Lahore																										
	Admission Form for BDS Program																										
DTE:	The form shall be submitted to the Office of the Controller of Examinations. Please fill in the form in black ink and clearly print or type 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 neatly as possible. Admission Form 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 " are provided in the form, the box adjacent to the appropriate answer is to be ticked or checked. Or C											Please affix photograph here attested from front side (4X4 cm) with blue background															
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APPLICANT'S PERSONAL INFORMATION																											
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7	Mailing Address (mention all relevant information like post code etc.)																										
8	Mobile/ Telephone Number (with city code) E-mail / Fax #																										

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Dated: ___

Signature of Principal (with stamp)

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UNIVERSITY OF HEALTH SCIENCES

Lahore

Roll No : _____

(Office use only)

Roll NO SLIP (FOR SUPERINTENDENT)

	Controller of Examinations
Name of Institution:	 attested from Front side (4X4 cm) with blue background
Father's Name:	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.

Signature of the Candidate

UNIVERSITY OF HEALTH SCIENCES Roll No : _____ Lahore

ROLL NO SLIP

(FOR CANDIDATE TO BE HA	ANDED OVER TO THE SUPERINTENDE	ENT)
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Controller of Examinations

Note: Cell/mobile phones, palm tops, minicomputers and any other electronic equipment likely to help the candidates are completely prohibited in the examination centers.

Subjects in which to be examined:

Signature of the Candidate



Name of Institution:



Name:

Examination: _____

(Office use only)