Serial Number-----(For Office Use)



# UNIVERSITY OF HEALTH SCIENCES LAHORE

Khayaban-e-Jamia Punjab, Lahore Phone No (Off) 042-99231304-9

Admission form for

# **Post-Graduate Certificate in Family Medicine (General Practice)**

Centre of Training you are applying for:

Lahore	Jhang	
--------	-------	--

# A) Applicant's Personal Information

#### Full Name

						1	1	1								
 Fatho	r's Na	me														
	1 5 IVA															
Date	of Birt	h (DD	)/MN	Ι/ΥΥΥ	Y)					]			Age	2	Years	5
Date of Birth (DD/MM/YYYY) Age Years Domicile																
CNIC Number																
				-									-			
Gender M F Nationality																
Religi	on															
Marit	al Stat	tus	1			T	T	T		I				I		
Perm	anent	Addr	ess	1		1	1	1	[		[			1		
	الم ام ا															
Posta	l Addr	ess														
Vobile Number																
Lengen									I							
Email	Email								1							
L	1			1		I	I	I	1		1					

### B) Qualifications

Degree	Title of Degree	Institute/Board/University	Passing Year	Marks Obtained/ Grade / Percentage/Division
Matric				
Intermediate				
MBBS				
MCPS /MRCGP /FCPS				
Any other specialization?				

# C) Work Experience

Position	Department	Institute	Duration

D) Please write a brief about your understanding of role of Family Medicine / General Practice in health care system and what makes patient care more effective and comprehensive in primary care?



### E) 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

Any relevant qualifications / courses

- ── 03 photographs size (3×3 cm) attested from back side
- O1 photograph size (3×3 cm) attested from front side and pasted on the given space

### F) Certificate by the applicant

I hereby solemnly declare that: (1) the information provided and statement made by me in this form are true and correct to the best of my knowledge and belief and nothing material has been concealed or withheld herein. (2) I shall be responsible if my application form is rejected for any errors, wrong or incomplete entries made by me. (3) I understand that applying for this course without being eligible for it is a crime punishable under the act of law, and in such case, the university has every right to cancel my application. (4) If selected, I will be responsible to submit the required course fee of Rs 40,000 /-

Date: \_\_\_\_\_

Signature of Applicant\_\_\_\_\_