

# MOST IMMEDIATE

Web Site : www.pmdc.org.pk  
E-mail : pmdc@pmdc.org.pk

No.PF.12-F-2012(Insp.)/241936

The Statutory Regulatory & Registration Authority for  
Medical & Dental Education and Practitioners



## REMINDER

**PAKISTAN  
MEDICAL & DENTAL COUNCIL**  
G-10/4, Mauve Area,  
ISLAMABAD.

UAN : 111-321-786  
Tel : (92 51) 9106151-54  
Fax : (92 51) 9106159

Dated 24<sup>th</sup> October, 2012.

The Principal,  
Liaquat University of Medical & Health Sciences,  
Jamshoro.

*Wazir E. ...*  
*Dr. Ghazia Trfan*  
*1.11.12.*

**SUBJECT: FACULTY REGISTRATION**

Dear Sir,

I am directed to refer PM&DC letter dated 3<sup>rd</sup> August, 2012, on the subject cited above (Copy enclosed).

You are required to complete and send the updated registered faculty by PM&DC to undersigned within one week of issuance of this letter to upload on the PM&DC official website.

In case of any query, you may contact with Assistant Registrar (Recognition Section).

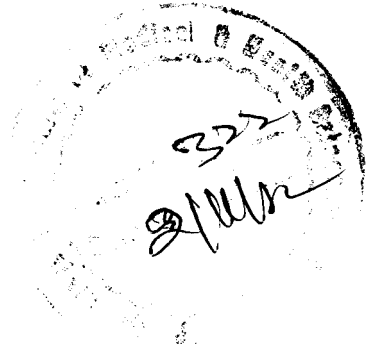
For strict compliance.

Yours sincerely,

*Dr. Ghazia Trfan*  
(Dr. Ghazia Trfan)  
Assistant Registrar

C.c.

- President, PM&DC.
- Vice President, PM&DC.
- Advisor (PG)
- Advisor (UG)
- Registrar, PM&DC.
- Assistant Registrar (Faculty Registration Section).





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MEDICAL & DENTAL COUNCIL**  
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UAN : 111-321-786  
Tel : (92 51) 9106151-54  
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Dated 3<sup>rd</sup> August, 2012.

Vice Chancellor,  
Liaquat University of Medical & Health Sciences,  
Jamshoro.

**SUBJECT: FACULTY REGISTRATION**

Dear Sir,

As per PM&DC rules, faculty of every medical/dental college must be registered with PM&DC and only the registered faculty is acceptable as faculty. No teaching job or teaching experience in any recognized undergraduate or postgraduate medical or dental institution shall be acceptable to the Council unless the applicant has a valid faculty registration certificate.

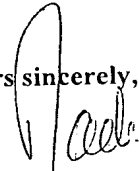
It is informed that if faculty members of your college are not registered with PM&DC, then it is a violation of PM&DC rules. You are to ensure that all the faculty of your college is registered with PM&DC.

In the light of the above, you are required to check the faculty registration status of each of your faculty member and then send the request of your non registered faculty members for faculty registration to the PM&DC. Faculty registration form is attached and can be downloaded. Kindly ensure that form is filled in correctly and is returned to PM&DC by the applicant faculty member after your endorsement along with required fee i.e. 2000/- (Rupees Two Thousand only) for each faculty member.

You are required to appoint a focal person, who will meet the Assistant Registrar (Recognition Section) to sort out any problems and who will ensure that all your faculty is registered with PM&DC.

Circulated for strict compliance.

Yours sincerely,

  
 (Dr. Ahmad Nadeem Akbar)  
 Registrar

C.c.

- President, PM&DC.
- Incharge, Council & Inspection Section.
- Assistant Registrar, Recognition Section.



## UNDERTAKING

I fully understand that I am being registered as Faculty, under the Part XII of the Pakistan Registration of Medical & Dental Practitioners Regulation 2008, which I have read and fully understood and shall comply fully with these regulations. I also undertake that whatever information and documents are attached with this application are true. I have fully understood that any violation of these rules shall make me liable for action and may have penal consequences.

Yours Truly,

Name and Signature of the Applicant

## ENDORSEMENT:

I fully endorse the contents of this application:

Signature and Seal of Principal / Dean/Head of Institution: \_\_\_\_\_

## INSTRUCTIONS FOR APPLICANT:

1. Please ensure that your application is complete in all respects and all relevant documents as stated above have been attached.
2. Please ensure that all documents have been attested by the Principal/ Dean/ Head of Institution clearly showing his name and designation with official stamp.
3. Applications of only full-time Faculty will be entertained for registration/ renewal. Please note that Faculty employed on part-time/ adjunct/ honorary basis etc. shall not be accepted for registration.
4. **Incomplete applications shall not be accepted and will be returned in original without processing.**

(For Office Use Only)

Faculty No. \_\_\_\_\_ Date of Registration \_\_\_\_\_

Assistant

Superintendent

Assistant/ Deputy Registrar

Official Stamp