## **APPLICATION FORM**

## For Admission in MBBS Course Sindh Province

(Public Sector Institutes) Academic Session 2024-25

DISTRICT	
For the candidates of SMBBMC Lyari	
Mention the Town:	

- 1. Paste here your recent photograph and submit <u>Four</u> attested extra copies with the application form.
- 2. Ensure your full name is written on the back of each photograph

NOTE: Please read the form carefully and fill all the columns In Block Letters with Blue / Black Pen Online forms are mandatory to be filled at the following URL:

http://www.lumhs.edu.pk

	PERSONAL INFOR	MATION		
NAME OF APPLICANT:				
FATHER'S NAME:		SURNAME:		
Date of Birth:	Age:	Male Female		
Nationality:		Religion:		
District of Domicile (Candidate):				
District of PRC (Candidate):				
District of PRC (Father/Mother):		of Domicile (	(Father/Mother):	
CNIC or 'B' form No: of candidate (if	CNIC is not available)			
Date of issuance of CNIC:				
Candidate's Email:	Phone No:		Mobile No:	
	PARTICULARS OF	MDCAT		
MDCAT Roll Number	Test Center		MDCAT Obtained Score	
Name of Examination	Matric Science / O Les IBCC Equivalence	vel as per	Inter Science / A level as per IBCC Equivalence	
Seat No				
Passing Year				
Name of Board				
Total Marks Obtained / Out of				
Division / Grade				
% Percentage				
-				
Date of Submission	Signature of Father/Gua	rdian	Signature of Applicant	

PARTICULARS OF FATHER /GUARDIAN					
Name	Occupation	1			
Designation	Departmen	nt			
Office Phone No.	Mobile no.				
Father / Guardian CNIC No:	Email:				
Present Address:					
Permanent Address:					
CONTACT IN EMERGENCY					
Name of Person:					
Relationship:	Phone No: (Home)	Mobile No:			
Address:					

**Note:** All the candidates are advised that application forms should be filled with due care and options will be considered as per merit cum choice basis.

#### OPTION FOR ADMISSION IN THE MEDICAL INSTITUTIONS

If I am selected on open merit basis, I hereby give my priority wise option for admission in the following Medical Colleges/Institution in Sindh, Balochistan and AJK Muzaffarabad against Merit Cum Choice seats from the list given below.

- 1. Liaquat University of Medical & Health Sciences, Jamshoro (LUMHS)
- 2. Dow University of Health Sciences Karachi (DUHS)
- 3. Jinnah Sindh Medical University, Karachi (JSMU)
- 4. Peoples University of Medical & Health Sciences for women, Shaheed Benazirabad (PUMHSW)
- 5. Chandka Medical College, Larkana
- 6. Karachi Metropolitan University, Karachi.
- 7. Shaheed Mohtarma Benazir Bhutto Medical College, Lyari, Karachi
- 8. Gambat Medical College, PAQS Jilani Institute of Medical Sciences, Gambat.
- 9. Ghulam Muhammad Mahar Medical College, Sukkur
- 10. Khairpur Medical College, Khairpur Mirs
- 11. Mohtrama Benazir Bhutto Shaheed Medical College Mirpur, Azad Kashmir
- 12. Muzaffarabad Medical College, Azad Jammu Kashmir
- 13. Poonch Medical College, Rawala Kot, Azad Kashmir
- 14. Bolan Medical College, Quetta, Balochistan

1)	8)
2)	9)
3)	10)
4)	11)
5)	12)
6)	13)
7)	14)

## FOR DISABLED CANDIDATES YES No $(\sqrt{})$

#### Important note for candidates:

- 1. All candidates are advised to submit their application forms and required documents in an envelope, to be considered for Open merit, self-finance and Reciprocal(Merit cum choice)
- 2. The website is the only communication media for latest notifications and information please remain updated.
- 3. For 25 seats in SMBBMC, Lyari, Karachi (division wise, from Hyderabad, Mirpurkhas, Shaheed Benazirabad, Larkana and Sukkur) an application form will be available on website of LUMHS (www.lumhs.edu.pk)

Signature of Father / Mother/Guardian

Signature of the Applicant

Fill all boxes with your present address	Fill all boxes with your present address
Name:	Name:
Father Name:	Father Name:
Present Address:	Present Address:
Tel No:	Tel No:
Mobile No:	Mobile No:
Fill all boxes with your present address	Fill all boxes with your present address
Name:	Name:
Father Name:	Father Name:
Present Address:	Present Address:
Tel No:	Tel No:
Mobile No:	Mobile No:
Fill all boxes with your present address	Fill all boxes with your present address
Name:	Name:
Father Name:	Father Name:
Present Address:	Present Address:
Tel No:	Tel No:
Mobile No:	Mobile No:
Fill all boxes with your present address	Fill all boxes with your present address
Name:	Name:
Father Name:	Father Name:
Present Address:	Present Address:
Tel No:	Tel No:
Mobile No:	Mobile No:

# Two sets of documents shall be submitted with application form. CHECK LIST FOR MBBS PROGRAM SESSION 2024-25

S. No	Particulars Particulars	Cheek box (√)
1	Photocopy of MDCAT 2024 Admit Card.	
2	Photocopy of MDCAT 2024 result.	
3	University copy of Paid processing fee voucher.	
4	Filled application form.	
5	Copy of Matriculation Certificate (SSC) or O-Level Equivalence Certificate by IBCC.	
6	Copy of Matric marks certificate/ O-Level Transcript certificate.	
7	Copy of HSC Pre-Medical Certificate (Provisional) or A-Level equivalence Certificate by IBCC.	
8	Copy of HSC Pre –Medical marks certificate / A-Level Transcript certificate.	
9	Copy of Disability Certificate from Sindh Social Welfare Department / Civil Services Hospital (if applicable).	
10	Copy of candidate's permanent residence certificate (PRC-Form "C")	
11	Copy of candidate's Domicile	
12	Copy of father's permanent residence certificate.	
13	Copy of Domicile Certificate of father.	
14	In case of father not alive, copy of Death certificate of father from NADRA and copy of PRC and domicile of mother.	
15	In case of divorce, copy of divorce certificate along with copy of PRC and domicile of mother.	
16	Copy of National identity card or "B" form (if candidate is below age of 18 years).	
17	Copy of CNIC of Father.	
18	Four Passport size photographs of candidate with his /her name duly written on the back side of these photographs (other than pasted on the application form).	
19	Candidate applying under category of overseas Pakistani should submit proof of educational certificates of candidates from abroad and his/her father /mother working outside Pakistan.	