



GLOBAL

INSTITUTE OF MEDICAL & HEALTH SCIENCES
HYDERABAD SINDH.

Photo

APPLICATION FORM

INSTITUTE / COLLEGE		UNDERGRADUATE PROGRAM		DIPLOMA PROGRAM	
PERSONAL INFORMATION					
Name of Applicant					
Father's Name				Surname	
Date of Birth				Male	Female
CNIC No				Nationality	Religion
District of Domicile (Applicant)				Domicile No	
District of PRC (Applicant)				PRC No	
Permanent Address					
Present Address					
Phone No		Mobile No		Email Address	
PARTICULARS OF FATHER/GUARDIAN					
Name					
Occupation			Annual Income		
Designation			Department		
Office Address					
Office Phone		Cell No		Signature of Father / Guardian	
ACADEMIC QUALIFICATION					
Name of Examination		Matric Science / O Level		Inter Science / A Level	
Seat No					
Passing Year					
Name of Board					
Total Marks Obtained					
Division / Grade					
Date of Submission of Form:				Signature of Applicant	

AFFIDAVIT

(TO BE TYPED ON STAMP PAPER OF RS. 100/=)

I, _____ S/o, D/o _____

Muslim/Non-Muslim adult R/o _____

a candidate for admission in 1st year DPT/BS Nursing/ for academic session do hereby state on solemn affirmation / oath as under:

1. That, I am a holder of P.R.C of District _____ in Sindh/ _____ which was issued on the basis of Domicile of District _____ issued to me / my father / mother, and I have no other PRC / Domicile of any other District in Sindh/Other Province.

2. That, if, I am allowed admission in DPT / BS Nursing on the basis of Domicile / PRC, I shall not seek admission in any other Public / Private Sector Medical University or any other Degree College / University of the Country.

3. That, all documents submitted by me along with application form are genuine and correct and no false document has been submitted. If any document / information are found to be false, incorrect or otherwise I know that my admission is liable to be cancelled.

4. For wasting precious seat , else I will not be entitled to issuance of any certificate from the Institution. That, after my Final Selection, I shall complete the Course/ Degree Program of four years containing Eight(08) semesters. However, in case, I leave the Institute (GIMHS) before completion of the Course, I shall be liable to penalty of Rs. 600,000/- (Rupees Six Hundred Thousand / Three Lac only) payable through Pay Order / Demand Draft.

5. That, I also undertake not to involve myself in any kind of Political Activity throughout tenure in this institution as a student and incase, I am found involved in such activities, the authority of the Institute shall be at liberty to expel/ rusticate me and to cancel my admission.

6. That, whatever is stated above is true & correct to the best of my knowledge & belief.

Signature of the Candidate

Signature of the Father/ Guardian

C.N.I.C NO: _____

C.N.I.C NO: _____

Attested By (Judicial / First Class) Magistrate. With Round Seal

REQUIRED DOCUMENTS FOR ADMISSION

2. Photocopy of Secondary School Pass Certificate (Matriculation) or O-Level Equivalence Certificate by IBCC.
3. Photocopy of Secondary School Marks Certificate (Matriculation) or O-Level Equivalence Certificate by IBCC.
4. Photocopy of Higher Secondary Pass Certificate (Intermediate) or A-Level Equivalence Certificate.
5. Photocopy of Higher Secondary Marks Certificate (Intermediate) or A-Level Grade Statement Certificate by the Board.
6. Photocopy of Candidate's Domicile.
7. Photocopy of Candidate's Permanent Residence Certificate (PRC Form "C")
8. Photocopy of Candidate's C.N.I.C or if, the age of candidate is not of 18 years provide four (04) Photocopies sets of "B" Form.
9. Photocopy of C.N.I.C of Father / Guardian.
10. Six (06) Candidate's Passport size Photographs.
11. Character Certificate.

Yes **No**

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Date: _____

Received by: _____