

Government Medical & Dental Institution of the Punjab



ADMISSION FORM
For Admission to First Year MBBS/BDS Programme
Session 2022-2023



Aggregate % with MDCAT

88.8939 %

Part1 Program : [Tick(P) the relevant Box(es)]

(A) MBBS

☒

(B) BDS

☒

Part2 Category of Seats : [Tick(P) the relevant Box(es)]

(A) Open Merit

☒

(D) Cholistan

☐

(B) Students with Disabilities

☐

(E) Overseas

☐

(C) Under Developed Districts

☐

(F) Reciprocal

☒

Part 3 Personal Information

1. Hafiz-e-Quran ☐

2. Name of the Applicant

Azka Javed

3. Father/Guardian's Name

Javed Iqbal

4. Mother's Name

Naseem Javed

5. Gender

Female

6. Nationality

PAKISTAN

7. Date of Birth

22/01/2003

8. District of Domicile

Bahawalpur

9. Area Of Residence

Rural

10. CNIC/POC/Passport/B-Form

3120551475630

11. Mailing Address (Res.) in Pakistan only

Post office khas chak no 50 DB, Tehsil Yazman Dist. Bahawalpur

12. Tel (Landline)

13. Cell

03438710268

14. E-mail

azkaishere@gmail.com



Final Copy

Part 4 Qualifications(Aggregate marks in HSSC / equivalent must not be less than 60% i.e. 660/1100)

Examination Passed	Science Subjects	Institution Type	Board / University	Year of Passing	Marks Obtained	Total Marks
SSC/10th Grade/ O-Level	Science	Private Sector	Bise bwp	2018	1059	1100
HSSC/12th Grade/ A-Level	Pre medical	Private Sector	Bise bwp	2021	1056	1100

Intermediate/Equivalent (Subject) Scores

Chemistry :	189 /	200
Biology :	200 /	200
Physics/Maths :	185 /	200

Part 5 Admission Test

MDCAT Marks

MDCAT Year-CNIC	Centre from where appeared	Marks Obtained
2022-3120551475630	Not Applicable	164
MDCAT Applicant Name		MDCAT Applicant CNIC
Azka Javed		3120551475630

Part 6 Solemn Affirmation by the Applicant

I **Azka Javed** S/D/O **Javed Iqbal**

solemnly affirm that the information contained in this Admission Form, and the documents attached with this form, are complete and accurate.

I understand that if any information in this application, or in the documents and certificates that are attached with this application, is not complete or accurate, I shall not be considered for admission, and if somehow admitted, the University shall cancel my admission in accordance with the provisions of the Prospectus.

I have gone through the rules and regulations contained in the Prospectus, and I undertake to abide by all conditions.

I understand that the Order of Preference for colleges submitted by me in this Admission Form is final and no subsequent change is permissible.

I agree that submission of this Admission Form does not confer any right on me in respect of selection for admission, which shall only be granted on merit.

I understand and agree that if admitted to MBBS programme being my first preference as given in this Admission Form, I shall be excluded by the University from the selection process for BDS and vice versa.

Azka Javed

Name of Applicant

Date: 11/12/2022

Final Copy

Preference No.	Full Name of the Institution
1	Nishtar Institute of Dentistry, Multan - BDS
2	de'Montmorency College of Denitstry, Lahore - BDS
3	Dental Section, Punjab Medical College, Faisalabad - BDS
4	Nishtar Medical College, Multan - MBBS
5	King Edward Medical University, Lahore - MBBS
6	Quaid-e-Azam Medical College, Bahawalpur - MBBS
7	Rawalpindi Medical College, Rawalpindi - MBBS
8	Khyber Medical University, Peshawar - Reciprocal
9	Allama Iqbal Medical College, Lahore - MBBS
10	Ameer ud Din Medical College, Lahore - MBBS
11	D.G. Khan Medical College, D. G. Khan - MBBS
12	Fatima Jinnah Medical University, Lahore - MBBS
13	Gujranwala Medical College, Gujranwala - MBBS
14	Khawaja Muhammad Safdar Medical College, Sialkot - MBBS
15	Nawaz Sharif Medical College, Gujrat - MBBS
16	Punjab Medical College, Faisalabad - MBBS
17	Sahiwal Medical College, Sahiwal - MBBS
18	Sargodha Medical College, Sargodha - MBBS
19	Services Institute of Medical Sciences, Lahore - MBBS
20	Sheikh Zayed Medical College, Rahim Yar Khan - MBBS
21	Mohtarma Benazir Bhutto Shaheed Medical College, Mirpur, AJK - Reciprocal
22	AJK Medical College, Muzaffarabad - Reciprocal
23	Poonch Medical College, Rawlakot - Reciprocal
24	Bolan Medical College, Quetta - Reciprocal

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Depositor Receipt (Customer Copy)



Challan ID 57052469

CNIC No 3120551475630

Name Azka Javed

Father Name Javed Iqbal

Date 11/12/2022

Application Fee	850.00
Bank Service Charges	150.00

Total Amount Rs 1000/-

Amount In words One Thousand rupee only

CustomerSignature

DepositorSignature



Depositor Receipt (Bank Copy)



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CNIC No 3120551475630

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