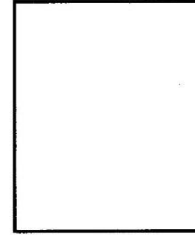




# AMNA INAYAT MEDICAL COLLEGE

## APPLICATION FORM

Form No. 603



1. Full Name: \_\_\_\_\_ Gender: Male / Female
2. Father's Name: \_\_\_\_\_
3. Date of Birth: \_\_\_\_\_ Personal Contact No: \_\_\_\_\_  
(DD-MM-YYYY)
4. Nationality (According to Passport): \_\_\_\_\_ Place of Birth: \_\_\_\_\_
5. CNIC NO. / B. Form: 

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(if residing abroad, provide Social Security No.)
6. Passport No: 

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7. Current Residential Address: \_\_\_\_\_  
\_\_\_\_\_
8. Permanent Address: (if different from above) \_\_\_\_\_
9. Father's / Guardian's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Phone Office: \_\_\_\_\_ Residence: \_\_\_\_\_ Cell: \_\_\_\_\_  
Office Address: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Fax No: \_\_\_\_\_
10. Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_
11. Contact in Case of Emergency?  
Name: \_\_\_\_\_ Relation to Applicant: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Phone Office: \_\_\_\_\_  
Postal Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone-Landline: \_\_\_\_\_ Cell: \_\_\_\_\_

12. Academic Record:

Examination	Year	Mark / Grade	Institution Name
<ul style="list-style-type: none"> <li>• F.Sc</li> <li>• A-Levels</li> <li>• International Baccalaureate</li> <li>• American High-School Diploma</li> </ul>			808
<ul style="list-style-type: none"> <li>• Matriculation</li> <li>• O-Levels</li> </ul>			

(Candidates who hold qualifications other than F.Sc and Matriculation will require Equivalence Certificate from the Inter-Board Committee of Chairmen):

13. Appeared in Medical College Entry Test?

Yes:  No:  Year of Appearing:     Score:

14. Status of Applicant: (Please Tick One)

I wish to apply as: Pakistani Student  Overseas Pakistani Student  Foreign Student

(If you qualify and want to apply in two categories, please indicate your priority as 1st & 2nd )

Hostel Accommodation: Would you require hostel accommodation, if admitted Yes:  No:

15. DECLARATION:

I Mr. / Mrs. \_\_\_\_\_ Son / Daughter of \_\_\_\_\_

an applicant for admission to the Anma Inayat Medical College, solemnly affirm and declare that the above information provided by me is correct.

16. Applicant's Sign. \_\_\_\_\_ Parent's / Guardian's Sign. \_\_\_\_\_ Date: \_\_\_\_\_

17. Submitting your Application:

Completed applications should be submitted along with a processing fee of Rs. 2000/- in the form of cash or bank draft in favor of Amna Inayat Medical College.

**Instructions:**

- a. Name of the candidate must conform with his/her name on CNIC and matriculation certificate.
- b. Please attach attested photocopies of the following:
  - (i) CNIC (Candidate & Parents three each)
  - (ii) Domicile
  - (iii) All academic documents (three each as mentioned in academic record table No. 12, 13 including valid equivalence certificate issued by IBCC)
- c. Please attach 10 recent colored sky blue background photographs: