



**APPLICATION FORM FOR MEDICAL COLLEGE'S  
GOVERNMENT OF THE BALOCHISTAN  
ACADEMIC SESSION: 2023-2024**



DIVISION \_\_\_\_\_  
DISTRICT \_\_\_\_\_  
RESERVED CATEGORY \_\_\_\_\_

FORM ID. \_\_\_\_\_  
MDCAT ROLL NO. \_\_\_\_\_  
ACADEMIC SESSION 2023-2024.

**PLEASE FILL ALL COLUMNS IN CAPITAL LETTERS**

**APPLIED FOR:** MBBS  BDS   
**SEAT CATEGORY** GENERAL  DISABLED  MINORITY

Recent  
Passport  
Size  
Photograph

NAME: \_\_\_\_\_ GENDER: \_\_\_\_\_ RELIGION: \_\_\_\_\_

AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

CANDIDATE'S CNIC: 

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FATHER NAME: \_\_\_\_\_

FATHER'S CNIC: 

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OCCUPATION: \_\_\_\_\_ EMPLOYER'S ADDRESS: \_\_\_\_\_

HOME DISTRICT: \_\_\_\_\_ DIVISION: \_\_\_\_\_

LOCAL / DOMICILE NO. \_\_\_\_\_ DATE OF ISSUE \_\_\_\_\_

FATHER / GUARDIAN -LOCAL / DOMICILE NO: \_\_\_\_\_

PRESENT MAILING ADDRESS: \_\_\_\_\_

PERMANENT MAILING ADDRESS: \_\_\_\_\_

CONTACT NO. LANDLINE NO: \_\_\_\_\_ CELL NO: \_\_\_\_\_

WHATSAPP NO: \_\_\_\_\_ EMAIL ID: \_\_\_\_\_

**EXAMINATIONS PASSED**

NAME OF EXAMINATION	ACADEMIC PASSING YEAR	ANNUAL / BI-ANNUAL	TOTAL MARKS	MARKS OBTAINED	MAJOR SUBJECT.	NAME OF BOARD OR UNIVERSITY
MATRICULATION / EQUIVALENT "O" LEVEL						
F.SC / EQUIVALENT "A" LEVEL						
MDCAT SCORE						

**F.Sc ELECTIVE SUBJECT (2021)**

Physics		Chemistry		Biology		Obtained Marks	Total Marks
Obtained	Total	Obtained	Total	Obtained	Total		

REGISTRATION NO: \_\_\_\_\_ BOARD OF SECONDARY EDUCATION OF \_\_\_\_\_

BANK FEE CHALAN DETAIL				
CHALLAN NO.	BANK BRANCH CODE.	DEPOSIT DATE	AMOUNT (RS)	BANK LOCATION

**REQUIRED ATTESTED DOCUMENTS**

1. Matriculation pass certificate/ Equivalence Certificate
2. Matriculation Marks Sheet or 'O' Level Equivalence Certificate issued by IBCC.
3. Intermediate Science (Pre-Medical) Marks Sheet and pass Certificate or "A" level (Pre-Medical)  
Equivalence certificate by IBCC with Transcript Certificate.
4. National Identity Card from NADRA "B" Form of candidate (as applicable)
5. Local /Domicile Certificate of Candidate issued by authorized District Magistrate / Deputy Commissioner.  
National Identity Card of Father/Mother from NADRA (Incase of Death of Father or Divorce).
6. Affidavit on Non-Judicial Stamp paper only attested by 1<sup>st</sup> Class Magistrate with a statement that the candidate his father/ guardian possesses only one Local Domicile.
7. Character Certificate from Grade-17 or above Government Officer or Principal / Head of last attended Institution.
8. Candidates from Quetta Rural would produce / submit a Certificate from Deputy Commissioner (D.C Quetta).  
With confirmation that the candidate is applying against / for reserved seat of Quetta Rural Area.
9. Four (04) recent passport size photograph with white or blue background.
10. MDCAT Result Copy.

**DECLARATION OF CHOICE /PREFERENCE****VERY IMPORTANT**

- a) List up the priority of colleges in the order you would like to be considered for admission.
- b) Preference once given shall be final and cannot be changed subsequently. Think carefully before writing.
- c) Do not use abbreviations. Cutting / erasing / over writing.
- d) The applicant will never be considered for college which he/she has not opted in the list of choices. The Admission Committee shall not assign a college by itself if the alternate choices are not indicated. The choice of Medical Institution once opted by a candidate will not be changed in any circumstances.

**OPTION FOR ADMISSION IN THE MEDICAL INSTITUTIONS IN PUNJAB, SINDH, AJ&K & BALOCHISTAN (IN ALPHABETICAL ORDER)**

- |  |   |
|--|---|
| (1) Azad Jammu Kashmir Medical College, Muzaffarabad (AJ&K)                | (11) Loralai Medical College, Loralai (LMC)                           |
| (2) Bolan Medical College, Quetta (BMC)                                    | (12) Mekran Medical College, Turbat (MMC)                             |
| (3) D.G Khan Medical College, Dera Ghazi Khan (DGMC)                       | (13) Mohtarma Benazir Bhutto Shaheed Medical College, Mirpur (MBBSMC) |
| (4) Dow University of Medical & Health Sciences, Karachi (DUHS)            | (14) Poonch Medical College, Rawalakot (PMC (R))                      |
| (5) Fatima Jinnah Medical University, Lahore (Only for Girls) FJMU         | (15) Punjab Medical College, Faisalabad (PMC (F))                     |
| (6) Gujranwala Medical College, Gujranwala (GMC)                           | (16) Quaid-e-Azam Medical College, Bahawalpur (QMC)                   |
| (7) Jhalawan Medical College, Khuzdar (JMC)                                | (17) Rawalpindi Medical College, Rawalpindi (RMC)                     |
| (8) Jinnah Sindh Medical University Karachi (JSMU)                         | (18) Sahiwal Medical College, Sahiwal (SLMC)                          |
| (9) Khawaja Muhammad Safdar Medical College, Sialkot (KMSMC)               | (19) Sargodha Medical College, Sargodha (SMC)                         |
| (10) Liaquat Medical University of Health Sciences, Jamshoro Sindh (LUMHS) | (20) Sheikh Zayed Medical College, Rahim Yar Khan (SZMC)              |

CHOICE	NAME OF THE MEDICAL COLLEGES/ INSTITUTION FOR MBBS COURSE	ABBREVIATIONS	SIGNATURE OF THE APPLICANT

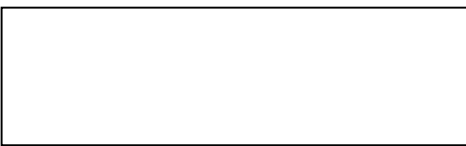
**OPITION FOR ADIMISSION IN DENTAL COLLEGE/ INSTITUTION IN BALOCHISTAN AND SINDH**

- (1) Dow University of Medical & Health Sciences Karachi (DUHS)
- (2) Liaquat University of Medical & Health Sciences Jamshoro (LUMHS)
- (3) Bolan Dental College, Quetta (BMC)

Choice No.	Name of the Medical College/ Institution for BDS	Signature of the Applicant.

I, \_\_\_\_\_ S/D/ward of \_\_\_\_\_, an applicant for admission to the 1<sup>st</sup> year MBBS/BDS in above mentioned Medical /Dental Colleges, hereby agree that if admitted shall abide by rules and regulations in-force in BMC Prospectus at present or those that may be made thereafter so long I am a student of the College /University. I will do nothing either in – or out-side the College that may interfere with its administration and discipline or may bring the College into disrepute.

\_\_\_\_\_  
**Name of Applicant**  
 Date \_\_\_\_\_

\_\_\_\_\_  
**Signature of Applicant**  
  
**Thumb Impression**  
 (Left Thumb for Male and Right for Female)