



OFFICE OF THE DIRECTOR
POSTGRADUATE MEDICAL CENTER
PEOPLE'S UNIVERSITY OF MEDICAL & HEALTH SCIENCES
FOR WOMEN, SHAHED BENAZIRABAD
Phone #: 0244-9370249-58 (Ext: 2282), Website; www.pumhs.edu.pk

Form No. _____

Application For Admission

(A). Personal details (Please use CAPITAL Letters and write your details EXACTLY as they appear on accompanying documents)		
Full Name:		Upload Pictures Here
Gender Male:		
Marital Status:		
CNIC Number:		
Father's Name:		
Present Position:		
Private / In-service:		
Course Applied for:		
Name of Employer Organization:		
PM&DC Registration No.		
Present Address / Mailing:		
Address Permanent:		
Email Address:		
Cell No. / Phone No:		
Pay Order / Bank Draft:		
Date of Birth:		
Nationality:		
CNIC #.:		
Passport #.:		
Pay Order / Bank:		Date:
Draft No. Date:		Date:

(B). Educational Qualifications						
Title	Board / University	No. of Attempts	Year Awarded	Total Marks / GPA	Obtained Marks / GPA	% age
1st Prof.						
02nd Prof.						
03rd Prof.						
4th Prof.						
Final Prof.						
Metric/ SSc or Equivalent						
F.Sc./ HSSC or Equivalent						
MBBS / BDS.BS MLT						
M.Phil. / FCPS subject						
Additional Qualification (if any)						

(C). Research Personals (for Ph.D Candidate only).	
Research Proposal No.1 of national Importance:	
Brief Proposal (up to 250 Characters) (For Ph.D Candidates only)	
Research Proposal No.1 of national Importance:	
Research Proposal No.2 of national Importance: (For Ph.D Candidates only)	
(D). Additional information (if any) (For Ph.D Candidates only)	

(E). List of Research Publications (Name, Authors, Journal, Date of Publication) – Please attested copies with the hardcopy of the application. (For Ph.D Candidates only)

1.

2.

3.

4.

5.

6.

Please use separate sheet if

required

(F) . List of Conferences / Workshops / Courses attended – Please attach attested copies of certificates with the hard copy of the application. (For Ph.D Candidates only)

1.

2.

3.

4.

5.

6.

Please use separate sheet if

required

Instructions Please attach scanned images of the required of documents in the relevant fields below by clicking on image. You can click on the field again to change the image if required. Save the PDF file afterwards to embed the images.

(G) . Check List								
Have you							Yes	No
S.No	Task (Please Check the Appropriate option)							
01	Attached Pay Order / Bank Draft in original							
02	Filled all the relevant fields							
03	Enclosed attested copies of academic transcripts (including certified translation if necessary) including							
		Metric/SSC		F.Sc./HSSC		B.Sc. MLT		
		MBBS / BDS		FCPS	02 Yrs	04 Yrs		
04	Enclosed certificate of experience from the employer (for Ph.D candidates)							
05	Enclosed letter of permission / NOC from the employer (for in-service candidates only)							
06	enclosed the migration certificate from the last university (if available) (for Ph.D candidates)							
07	Enclosed attested copy of the valid CNIC							
08	Enclosed attested copy of the Domicile							
09	Enclosed Four (04) (Back side) attested copies of the recent passport size photographs							
10	Enclosed attested copies of the research publications (for Ph.D candidates)							
11	Enclosed attested copies of the certificates of conferences / workshops / courses (for Ph.D candidates)							
12	Enclosed attested copies of PM&DC							
13	Enclosed attested copies of House job certificates							
14	Enclosed attested copies of Consolodiates / Trasnscrip Marks sheets							
Note: All relevant documents must be attached by the candidate with his / her application form. No benefit would be given for any document not attached at the time of submitting application or produced after the closing date. Applicants shall submit their original documents at the time of admission.								

I. Declaration & signatures

I solemnly declare that:

- I have neither joined nor shall join any other institution during the course of my studies at the Peoples University of Medical & Health Sciences Shaheed Benazirabad (SBA).
- I am not suffering from any infectious disease i.e. HIV, Hepatitis B, C etc.
- I understand that the University may vary or reverse any decision made on the basis of incorrect or incomplete information which I have provided.
- I understand that the University may obtain official records from any educational institution I have previously attended.

I undertake

- to abide by the Statutes, Regulations and Rules etc. framed by the University or the Department from time to time and shall be liable to any penalty including rustication/expulsion, in case of violation on my part.
to accept as a condition of my admission the authority of the University that a student can be required to withdraw his name from the rolls, if in the opinion of the Vice-Chancellor of the University or Chairman of the Department, his/her stay is not conducive to the welfare, either of himself/herself or others in the university or the department. that should I fail to withdraw my name immediately after being called upon to do so, it may be struck off the rolls of the university without any further notice to me.
- to not to "indulge in politics", and in case, I violate this undertaking and "indulge in politics" after my admission by the University, I shall be liable to expulsion without any notice under the order of the Vice-Chancellor which order shall be final.
- to accept as binding on me as long as I am a student, all rules and regulations in force at the time of joining and which might be framed subsequently.
- to show good behavior.
- to devote whole-heartedly to my studies and maintain the dignity and prestige of the University both in and outside the University.
- to pay in time all the dues and fine, if any.
- to intimate the new address to Registrar if there is any change in my contact address/phone number.
- to undertake to take examination unconditionally notified by the University or the department.

Signature of the applicant

Date: _____

List of Postgraduate Programs to be Applied for the Session March 2025

Program Please select Desired Program

A. DEGREE PROGRAMMES

05 Years Duration

M.S (Neurosurgery)
M.S (Orthopaedics)
M.S (Paediatric Surgery)
M.S (Urology)
M.D (Cardiology)

04 Years Duration

M.S (General Surgery)
M.S (Gynae & Obstetrics)
M.S (Ophthalmology)
M.S (Anaesthesiology)
M.S (Otorhinolaryngology)
M.D (General Medicine)
M.D (Paeds Medicine)
M.D (Neurology)
M.D (Psychiatry)

B. FCPS-II TRAINING

Anesthesiology
General Surgery
Gynae & Obstetrics
General Medicine
Ophthalmology
Pediatric Medicine
Pediatric Surgery
ENT
Neurosurgery
Urology

C. SECOND FELLOWSHIP IN PAIN MEDICINE.

02 Years Duration Training

After Passing fellowship in
Anaesthesiology

D. MCPS TRAINING

02 Years Duration

MCPS (Anaesthesiology)
MCPS (Gynae & Obstetrics)
MCPS (Ophthalmology)
MCPS (Pediatric Medicine)
MCPS (Otorhinolaryngology)

E. DIPLOMA PROGRAMMES

02 Years Duration

Anesthesiology	(DA)
Cardiology	(Dip-Card)
Child Health	(DCH)
Diploma in Clinical Pathology	(DCP)
Gynae & Obstetrics	(DGO)
Laryngology & Otology	(DLO)
Medical Radio-Diagnosis	(DMRD)
Medical Radio-Therapy	(DMRT)
Ophthalmology	(D.O)
Medical Jurisprudence	(DMJ)
Psychiatry Medicine	(DPM)
Clinical Neurology	(DCN)
Tuberculoses & Chest Diseases	(DTCD)

F. M.Phil. TRAINING

02 Years Duration

M.Phil. (Anatomy)
M.Phil. (Biochemistry)
M.Phil. (Histopathology)
M.Phil. (Microbiology)
M.Phil. (Physiology)
M.Phil. (Pharmacology)

Note: Application Form can also be downloaded from www.pumhs.edu.pk and to be submitted duly filled-in; through courier services at the Office of the Director Postgraduate Medical Center PUMHSW Nawabshah SBA along with all required Documents (Note: All Documents must be attested) and supported with Bank Chalan / Demand Draft of amount, reflected in schedule of fees in favor of **Account Title "Postgraduate Education Committee", PUMHSW Nawabshah SBA.**

Application Form to be sent to The Office of the Director Postgraduate Medical Center, Peoples University of Medical & Health Science Shaheed Benazirabad (SBA).