GAMBAT MEDICAL COLLEGE, GAMBAT
PIR ABDUL QADIR JILANI INSTITUTE OF MEDICAL SCIENCES
APPLICATION FORM
For Admission to
BS Degree Course
Academic Session 2023
General Merit

DISTRICT

NOTE: Please read and fill the form carefully. Fill all the columns in CAPITAL Letters with Blue / Black Ink.

PERSONAL INFORMATION

NAME OF APPLICANT:

FATHER'S NAME:

SURNAME: Date of Birth:

Nationality: Religion: Male ☐   Female ☐

District of Domicile (Candidate):

District of PRC (Candidate):

District of Domicile (Father / Mother):

CNIC or 'B' form No. of candidate (if CNIC is not available)

Father / Guardian CNIC No:

Present Address:

Address Mentioned on Domicile/PRC (Mandatory):

Candidate's Email: Father's Email:

Phone No: (Home)   Candidate's Cell: Father's Cell:

Name of Examination	Matric Science / O Level	Inter Science / A Level
Seat No.		
Passing Year		
Name of Board		
Total Marks Obtained / Out of		
Division / Grade		

Particulars of MDCAT

MDCAT Seat No.	Test Centre	Score	Year of Passing

_____   _____   _____
Date of Submission   **Signature of Father / Guardian**   **Signature of Applicant**

NOTE: RESPONSIBILITY OF ANY DISCREPANCY IN DATA WILL LAY ON THE SHOULDERS OF THE APPLICANT.

PARTICULARS OF FATHER / GUARDIAN

Name:	Occupation:
	Department:
Office Phone No.:	Cell No.:

CONTACT IN EMERGENCY

Name of Person:		
Relationship:	Phone No: (Home)	Mobile No:
Address:		

HAFIZ -E- QURAN

Sanad of the Hafiz -e- Quran: _____ Issued by: _____

PRIORITY WISE OPTIONS FOR BS DEGREE COURSE

1 _____	6 _____	11 _____
2 _____	7 _____	12 _____
3 _____	8 _____	13 _____
4 _____	9 _____	14 _____
5 _____	10 _____	

- Human Nutrition & Dieletics, ● Intensive Care & Anesthesia, ● Pulmonology & Critical Care, ● Pathology Laboratory
- Cardiology & Perfusion Sciences, ● Radiology & Nuclear Medicine, ● Surgical Care, ● Pediatrics Care,
- Opthalmonology Care, ● Dialysis Care, ● Emergency & Trauma Care, ● Obstetrics & Gynecology
- Gastroenterology & Hepatology. ● **Dental Technology & Dental Hygiene.**

Attach the following attested photostat copies of documents

01. SSC / O level / Matric Marks Certificate and Pacca Certificate.
02. HSC / A level or equivalent Marks Certificate.
03. MDCAT Marks Certificate of year 2022
04. Domicile of the Candidate.
05. PRC Form C of the Candidate.
06. Domicile of Father.
07. CNIC / B Form of Candidate.
08. CNIC of Father.
09. Hafiz-e-Quran Certificate (if applicable)
10. Father's death certificate (if applicable)
11. Rs. 1,500/- Challan receipt (Original College Copy)
12. 2 Passport size photographs. (Original)

_____
Signature of Father / Mother / Guardian

_____
Signature of Applicant

Website: www.gims.edu.pk

**The form can only be accepted through any recognized courier services.
By hand submission will not be entertained.**

Please Submit Original Filled Application Form along with required documents at:

**Directorate of Admissions
Gambat Medical College @ Pir Abdul Qadir Shah Jeelani
Institute of Medical Sciences, Gambat**

Fill all boxes with your present address

Name:

Father Name:

Present Address:

Mob No:

Fill all boxes with your present address

Name:

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Mob No:

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Mob No:

PIR ABDUL QADIR SHAH JEELANI
INSTITUTE OF MEDICAL SCIENCES, GAMBAT

Challan Form For Application Processing Fee

☐ **B.S** (4 year Degree Program)

MCB BANK LTD
A/C# 0774672881000283
GIMS Branch (1725)
FTN # 9030206-7
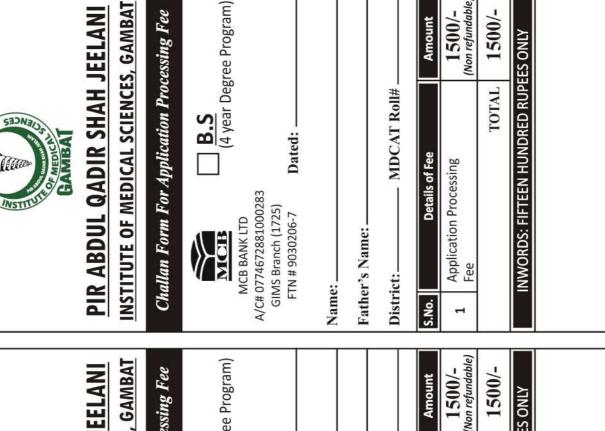
Dated: _____

Name: _____

Father's Name: _____

District: _____ MDCAT Roll# _____

S.No.	Details of Fee	Amount
1	Application Processing Fee	1500/- (Non refundable)
	TOTAL	1500/-

INWORDS: FIFTEEN HUNDRED RUPEES ONLY

Receiving Branch Stamp & Signature

Applicant's Signature