

GAMBAT MEDICAL COLLEGE
**PIR ABDUL QADIR SHAH JEELANI INSTITUTE OF MEDICAL
SCIENCES, GAMBAT.**

Dated: _____

OBJECTION FORM

Name _____

F/Name: _____

District of Domicile: _____

Entry Test Seat No. _____ CNIC: _____

Entry Test Score: _____

Entry Test Year: _____

Contact No: _____

OBJECTIONS:

Dated: _____

Signature of the Candidate

The objections may be communicated through following email address
(sikandar.admissions@gmail.com)

OR

Through courier service or submitting the objection by hand in the office of direction admissions
Gambat Medical College, Gambat. **Up to 17th March 2023** (office hours).