

13. Educational Information

Degree	Subject	Institute/ Board/ University	Passing Year	Obtained Marks	Total Marks	No. of Attempts	Grade/Division With Percentage
MATRIC/ O-LEVEL							
INTERMEDIATE /A-LEVEL							
MBBS/BDS OR EQUIVALENT							
M.Phil./MS/MD /MDS/FCPS OR EQUIVALENT							

14. Fee Details

Amount PKR: _____ Bank Challan No. /Pay Order No.: _____

Date: _____ Branch/Bank: _____

15. Declaration and Signature

I solemnly declare that:

- All the information provided by me in this form is correct to the best of my knowledge and belief, and no material has been concealed or withheld herein. Incomplete form in any way will be rejected.

Signature of Applicant

Date: / /

16. Check List

Answered all relevant fields and attached attested copies of all below mentioned documents/certificates:

- Matriculation
- Intermediate
- Equivalence of O & A levels from IBCC
- DMCs & Degree of all MBBS/BDS/equivalent professional examinations
- Attempt Certificate of MBBS/BDS/equivalent
- House Job Completion Certificate (One Year)
- DMCs and Degrees of M.Phil./MD/MS/MDS/FCPS or Equivalent (if applicable)
- CNIC/Passport
- Domicile certificate
- Four Passport size Photographs in blue background
- Valid PM&DC Registration
- Pay Order/ Bank Challan Receipt (attached in original)
- No Objection Certificate (NOC) from Current Employer

Session January, 2017

(Roll Number)

ORIGINAL
For Office Use

ADMITTANCE CARD
JCAT EXAMINATION

For office use only

PROGRAM _____

Venue: (for office use only): - _____

Date: 17-11-2016 Time: 10:00 am

Name: _____

Father's Name: _____

CNIC /Passport No. _____

Mobile: _____ E-Mail Address (**Compulsory**) -----

NOTE :

- Bring original CNIC/ PASSPORT.
- Bring your own Blue Ball Point and Clip Board; exchange of stationary is strictly prohibited.
- Cell Phones /PDAs/other electronic devices are strictly prohibited inside the Examination centre.
- No facility for collection of Cell Phones /PDAs/other electronic devices etc. will be available at the examination centre.
- Candidate must reach in the examination hall at least 30 minutes before the start of examination.

Signatures of the Candidate _____

**Paste Recent
Photograph
(ID card size)**

Session January, 2017

(Roll Number)

DUPLICATE
For Candidate

ADMITTANCE CARD
JCAT EXAMINATION

For office use only

PROGRAM _____

Venue: (for office use only): - _____

Date: 17-11-2016 Time: 10:00 am

Name: _____

Father's Name: _____

CNIC /Passport No. _____

NOTE:

- Bring original CNIC/ Passport.
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**Paste Recent
Photograph
(ID card size)**