



(2 Set of Application will be acceptable)
SCHOOL OF PHYSIOTHERAPY
King Edward Medical University/Mayo Hospital, Lahore
APPLICATION FORM FOR ADMISSION
FIVE YEARS, DOCTOR OF PHYSIOTHERAPY (DPT)
GRADUATES COURSE
(Session 2020-2024)

Fill this information as per Matric Certificate

1. Name of Applicant: _____
2. Father's Name: _____
3. Date of Birth: _____ Domicile: _____
4. CNIC No: _____ Hafiz-e-Quran _____
5. Present Address: _____

**Paste Recent
Passport Size
Photograph**

- _____ City: _____
6. Tel: _____ Mob: _____ Email: _____

Academic Information

Calculation of Aggregate

Examination	Board	Roll No.	Year of Passing	Marks
Matric				
F.Sc. (Pre-Med)				
MDCAT				
Others				

Matric 10%	F.Sc. 45%	MDCAT 45%	AGGREGATE

Date _____

Signature of the applicant

Receipt No. _____ Form No. _____ Date: _____

Documents:

1. Attested Copy of Secondary School Certificate.
2. Attested Copy of Intermediate Certificate.
3. Attested Copy of Applicant's Domicile Certificate.
4. Attested Copy of Character Certificate from Institution last attended.
5. Attested Copy of National Identity Card/ Form "B"
6. Attested Three Photographs.
7. Attested copy of Father's Identity Card.

Sign. _____
Admission Clerk

INSTRUCTIONS

1-ADMISSION CRITERIA:

a. **Eligibility:** The applicant on the last date of submission of applications for admission must possess the:

- i. Matriculation or equivalent securing a minimum of 60% marks
- ii. F.Sc (Pre-Medical) or equivalent securing a minimum of 60% marks
- iii. Age less than 20 years at the time of submission of application.
- iv. The candidate must have scored at least 60% marks in the latest MCAT exam. /SAT

b. **Application Process:** The Merit shall be calculated as follows:

$$(\% \text{age of Matric} * 0.1) + (\% \text{age of F.Sc} * 0.45) + (\% \text{age of MCAT/SAT} * 0.45) = \text{Total}$$

2. DOCUMENTS TO BE ATTACHED (ATTESTED PHOTOCOPIES)

- | | | |
|----|---|------|
| 1. | Attested Passport Size Photograph | (03) |
| 2. | Attested copies of Matric Certificate | (02) |
| 3. | Attested Copies of F.Sc. Certificate | (02) |
| 4. | Attested copies of MDCAT Result Card | (02) |
| 5. | Attested copies of CNIC/ Father I.D / B. form | 02) |
| 6. | Attested copies of Domicile Certificate | (02) |
| 7. | Bank Receipts (Original) & Photocopies | |
| 8. | Attested Copy of Character Certificate from Institution | (02) |
| | last attended | |

3. UNDERTAKING:

1. I will abide by the statues, Rules & Regulations framed by the University or by the Department/Institute/College
2. In case of violation, shall be liable to penalty including rustication/expulsion.
3. The University can withdraw the name of candidate from its roll it in the opinion of the Vice Chancellor/Director/Chairman/Principal his/her stay is not conducive for the Department/Institution/college.
4. I will not indulge in any kind of political activities within the premises of the University/Institute/College and shall be liable expulsion without any prior notice, by the order of the Vice Chancellor, the decision shall be final and can only be questioned before the Supreme Court of Pakistan vide Judgment/order of the Apex Court dated July 01, 1992.
5. I will show good attitude towards my teachers my teacher, fellow students and staff of the University/Department /Institute/College.
6. In case of any change in address I will intimate immediately to the office of the Principal, School of Physiotherapy K.E.M.U/Mayo Hospital, Lahore.
7. I have read all the relevant admission Rules and Regulations.

Signature of Applicant _____

Date: _____