



MUHAMMAD MEDICAL COLLEGE MIRPURKHAS

APPLICATION FORM FOR FCPS PART 1 PREPARATORY COURSE

I wish to apply for FCPS Part-1 preparatory course of Basic Medical Sciences at MMC, starting from ----- . My Particulars are as given below:

Name: _____.

F/Name: _____.

Date of Birth: _____.

CNIC No: _____-_____-_____.

Qualification: _____ . Year of Qualification: _____.

From: (Name of College & University) _____

_____. PM&DC Reg. No: _____.

ADDRESS:

Present address: _____

_____.

Permanent address: _____

_____.

Contact No. _____.

Email Address: _____.

PHOTOGRAPH

Educational record in reverse chronological order:

S.No.	Level of Education	Year of Passing	Institute/Bboard/University	Grade/Distinction

Experience in reverse chronological order:

S.No	Post worked on	Duration with dates	Place worked at

The information provided above is true and correct to the best of my knowledge & belief

Signature of Applicant

Note: Please enclose following supporting documents:

1. 2 Copies of CNIC/SNIC & 3 Photographs (Two Passport size and one small)
2. Educational certificates & marks sheet of Matriculation/O level & above.
3. PM&DC registration certificate.
4. Certificates of House job./ Other experience

For Office use:

Application received on By:	Documents verified and found correct Yes/No- reason: Signature:
Recommended by Chairman Selection Committee:	Final Approval by Competent authority: