



PAKISTAN INSTITUTE OF MEDICAL AND  
MANAGEMENT SCIENCES, PESHAWAR



ADMISSION FORM

SESSION FALL/SPRING \_\_\_\_\_

Serial No. \_\_\_\_\_

PROGRAMS: Write order of your preference ( \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ )

- BS MLT (PATHOLOGY)  BS RADIOLOGY TECHNOLOGY  
 BS SURGICAL TECHNOLOGY

Name: \_\_\_\_\_ Father/Husband Name: \_\_\_\_\_

(As per SSC or equivalent certificate in BLOCK letters)

Date of Birth (dd/mm/yyyy): \_\_\_\_\_ Gender: \_\_\_\_\_ Male / Female

Domicile: \_\_\_\_\_ CNIC No. \_\_\_\_\_ Nationality: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact No. (Tel: Res): \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Permanent address: \_\_\_\_\_

In case of emergency please contact: Name & Parentage: \_\_\_\_\_

Address: \_\_\_\_\_ Cell/Tel: \_\_\_\_\_

Application Processing Fee: Amount Rs. \_\_\_\_\_ Receipt No. \_\_\_\_\_ Date: \_\_\_\_\_

EDUCATIONAL RECORD:

QUALIFICATIONS (SSC & ONWARD)	YEAR OF PASSING	ANNUAL/ SUPPLY/ MARKS IMPROVED	EXAM. ROLL NO.	TOTAL MARKS	OBTAINED MARKS	NAME OF BOARD/UNIVERSITY

Have you appeared in KMU-CAT: (Yes / No). If yes, please provide the following information

Year	KMU-CAT ID	Marks Obtained

I, Mr/Mrs. \_\_\_\_\_ F/H/N \_\_\_\_\_ do solemnly declare that I shall abide by the PIMMS general & admission policy in vogue. The decision of management of PIMMS shall be final.

Attach following:

Attach attested photocopies of the following documents with the application form in the following sequence:

Note: Check (✓) the relevant box for the attached documents.

- Three Passport size colored photographs of the applicant attested on the back  
 A copy of Computerized National Identity Card of the candidate or Computerized Form B.  
 A copy of computerized National Identity Card of the father/guardian of the applicant.  
 A copy of Secondary School Certificate Examination (Science/equivalent)  
A copy of KMU-CAT result  
 Two copies of detailed Marks Certificate (F.Sc. or equivalent from Inter-Board Committee of Chairman)  
 Two copies of domicile certificate  
 Experience Certificate (as mentioned in the experience section) for in-service candidates.  
 That I will submit affidavit certificate to Management of PIMMS upon successful admission.

Certified that the facts produced are correct to the best of my knowledge & I shall be responsible for producing any concealment of facts or falsification, fabrication of data:

Signature of the Principal  
PIMMS

Signature of the Applicant's with Date

For Office Use only:

Remarks/Requirements (Scrutiny Committee)

Checked by Members of Scrutiny Committee: \_\_\_\_\_ Chairman Scrutiny Committee: \_\_\_\_\_