Islamabad Medical & Dental College

Main Murree Road, Bhara Kahu, Islamabad. Ph. 051-111 46 46 32, 92-51-2232045
Fax: 92-51-8433145, E-mail: admissions@iideas.edu.pk Website: www.iideas.edu.pk

Application for Admission in MPhil Community Dentistry

Passport Size Photograph

(attested on the front)

Please read and follow the below mentioned instructions carefully:

1. Fill in the form in block letters. (Type/Write)
2. Do not over-write or use blocking fluids e.g blanco, etc.
3. It is suggested that, at first the photocopy of each form to be filled. The original forms may then be filled accordingly.
4. The attesting authorities, where not mentioned, will be as per the rules of the Government of Pakistan.

Name of Applicant: _____ Gender: Male ☐ Female ☐

Father's Name: _____ Guardian's Name: _____

Date of Birth: (DD/MM/ YYYY) ☐☐ ☐☐ ☐☐☐☐ Marital Status: Single ☐ Married ☐

CNIC/Form B.No _____

Nationality : _____ Passport No. (Foreign/Expatriate applicant): _____

Contact Details:

Res. Ph #: _____ Personal Mobile1: _____ Personal Mobile 2: _____

Personal Email: _____

Present Mailing Address:

Street Address	District/Tehsil	City	Country

Permanent Address:

Street Address	District/Tehsil	City	Country

Person to be contacted in case of emergency: _____ Relationship: _____

Address: _____

Res. Ph #: _____ Mobile #: _____

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Educational Qualifications

(Please attach attested photocopies of the supporting documents)

Certificate/Degree	Institution Attended	Board/University	Grades/Marks	Year Passed
SSC or Equivalent				
HSSC or Equivalent				
BDS				
Any other				

House Job (one year house job after graduation is mandatory for admission)

From	To	Institution

Professional Experience

Duration	Position	Institution

Honors/Medals/Positions/Scholarships

Achievement	Institution/Occasion	Year

Extra-Curricular Activities/Interests: _____

_____

_____

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Declaration of the Candidate

I, Mr./Miss.....Son / Daughter of.....an applicant for admission to Islamabad Medical & Dental College solemnly affirm and declare that all statements and particulars mentioned in the admission application are true to the best of my knowledge and belief. I fully understand that if any of the above mentioned statements, particulars or documents are found to be incorrect or forged, I would be subject to refusal of admission to the Islamabad Medical & Dental College or if admitted, I will be subject to expulsion from the college without notice at any time during the course of my studies with all dues paid by me to the college shall standing forfeited in addition to the initiation of appropriate legal action against me.

Date: _____ Signature of Applicant

Declaration of the Father/Guardian

I,.....Father/Guardian of Mr./Miss .....
Undertake to fulfill all responsibilities, Financial obligations and otherwise, of my Son/ Daughter till the completion of his/her studies.

Date: _____ Signature of Father/Guardian

Sponsor's Information:

Who will sponsor (bear) your educational expenses of this programme:_____

Father ☐ Mother ☐ Guardian ☐ Self ☐ Other ☐

Monthly income of sponsor: Rs. _____ US$ _____ Foreign Source ☐ Pakistan Source ☐

Can sponsor easily meet the educational expenses of whole duration of this programme? Yes ☐ No ☐

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Note: Please do not forget to attach the following with the application form:

Three attested copies of each of the following:

- ☐ Matric/Equivalent Certificate
- ☐ F.Sc (Pre-Medical)/Equivalent Certificate (From IBCC)
- ☐ BDS Degree
- ☐ Detailed marksheet/ Transcript
- ☐ PMDC registration
- ☐ House job certificate
- ☐ Experience Certificate
- ☐ 2 recent passport size photographs (attested from back side)
- ☐ Computerized National Identity Card/Form-B of the candidate
- ☐ Computerized National Identity Card of Father/Guardian
- ☐ English Proficiency Certificate (for foreigners only)
- ☐ Workshop/Conference certificates (if any)
- ☐ Passport (for Foreign/Expatriate seats)

Note:
Applications forms downloaded from website must be accompanied by demand draft/ pay order of **Rs. 2,000**/- payable to "GAK Health Care International Ltd. - Islamabad Medical & Dental College" NTN # 4694571-5.

Online Applications without application fee will not be entertained.

The College authority(s) reserves every right to reject the admission at any time or on any grounds. mere submission of the admission form is not the guarantee for admission in Postgraduate Programme.

For office use only

Matric		
F.Sc		
Entry Test		
Essay Writing		
Interview		
Total Weightage		

Admission granted ☐ **Admission not granted** ☐

Director Admissions