

KHYBER MEDICAL UNIVERSITY APPLICATION FORM FOR ADMISSION B.SC. NURSING POST RN (02 YEARS) PROGRAM SESSION FALL 2022

Paste three photographs

		SESSIO	N FALL 2	022		F8F
Form No (Fo						
	(The form should	be filled in	BLOCK let	ters)	
Note: Please read the instreverse of application form No. 0977029551007019 (for application form.	n before filling	this form. Applica	nt shall pay	Rs. 3000/- ir	n KMU Account	t at the time of submission
Name:			Father/Husband Name:			
(As per SSC or equiv	alent certificate	in BLOCK letters)				
Date of Birth (dd/mm/y	ууу):			Gender:_	Male /	Female
Domicile:		CNIC No.:	Nationality:			ty:
Mailing Address:						
Contact No. (Tel: Res)Cell:			Email:			
Permanent address:						
In case of emergency p	lease contact	: Name& Pare	ntage:			
Application Processing I	Fee: Amo	unt: <u>Rs.</u>	Receipt	No	Dated:	
EDUCATIONAL RECORD):					
Qualification (SSC & onward)	Year of passing	Annual / Supply / Marks Improved	Exam. Roll No	Total Marks	Obtained Marks	Name of Board / University
SSC						
EXPERIENCE: Experience of the community		ed valid, only if valid	experience c	ertificate is p	rovided at the tim	ne of submission of application
Name of	Duration		Designation Lab De			Doscription
Organization/Institution	From	То	Designation		Job Description	
			1			

Were y	ou ever involved in criminal proceedi	ng in a Court of Law? If Yes, attach brief account:			
Certifie	ed that the facts produced are correct t	to the best of my knowledge:-			
Signature of the Applicant		Signature of the Applicant's Father/Guardian CNIC No			
For offi	ice Use only				
	rks / Requirements (Scrutiny Committee)				
Checked	by Members of Scrutiny Committee:	Chairman Scrutiny Committee:			
	attested photocopies of the following heck ($$) the relevant box for the attached	documents with the application form in the following sequence:			
	Three Passport size coloured photographs of the applicant attested on the back.				
	A copy of Computerised National Identity Card of the candidate.				
	A copy of computerized National Identity Card of the father/guardian of the applicant.				
	Two copies of domicile certificate (domicile certificate once submitted with the application form will not be changed).				
	Copy of Transcript and Certificate of Secondary School Examination (Science /equivalent).				
	Copy of Transcript and Certificate of Higher Secondary School Examination (Science /equivalent).				
	Copy (s) of DMCs and diploma in General Nursing attested by the respective Examination Board.				
	Copy (s) of DMCs and diploma in midwifery/A	ny Specialty, attested by the respective Examination Board.			
	Copy of valid PNC Registration.				
	Experience Certificate (as mentioned in the ex	sperience section).			
	Undertaking on judicial stamp paper of Rs. 30/- duly attested by notary public / Political Agent as per specimen given in the prospectus/admission (only after getting admission).				

IMPORTANT NOTES/INSTRUCTIONS

- 1. All applicants must appropriately fill and sign the admission form and undertaking. **Incomplete/not properly filled form in any respect will be rejected**. Avoid rewriting/cutting, while filling the form.
- 2. The undertaking/agreement must be filled in by the candidate on Judicial Bond of Rs. 30/- and should be duly attested by the Political Agent/First Class Magistrate. The specimen Performa for undertaking is attached with the application form.
- 3. Applicant must carefully study the Admission Policy of Khyber Medical University in order to understand the Rules.
- 4. The domicile once submitted with the admission form cannot be changed and shall be considered as final.
- 5. Application forms with any false statement by the candidate will be rejected
- 6. If any certificate submitted by the candidate is found **false**, **or forged** during his/her **study period** his/her admission shall be cancelled forthwith and he/she shall be **blacklisted** for admission to any professional colleges in Khyber Pakhtunkhwa. Further legal action can be taken against the student under the existing criminal laws.
- 7. Application form shall be submitted on due date to the Office of the Director, KMU Institute of Nursing Sciences, Phase 5, Hayatabad, Peshawar. Tel: +92-91-9217098