

**ADMISSION FORM**

Form. No. _____

PAKISTAN INSTITUTE OF PROSTHETIC & ORTHOTIC SCIENCES**BS in Prosthetic & Orthotic Sciences****Picture 3**

stipple /Paste your recent passport size color photograph not older than 6 Months having blue background

تصویر لازماً منسلک کریں بصورت دیگر فارم عمل میں نہیں لایا جائیگا۔

Personal Information: Use CAPITAL letters and leave spaces between words.

01. Name in Full:	<input type="text"/>																																																		
02. Father's Name:	<input type="text"/>																																																		
03. Candidate CNIC #:	<input type="text"/>										-										-										04. Domicile:	<input type="text"/>																			
05. Gender:		<input type="checkbox"/> Male					<input type="checkbox"/> Female					06. Date of Birth:		D		D		M		M		Y		Y		Y		Y		Write your Correct Date of Birth otherwise you will be rejected																					
07. Postal Address:																																																			
_____										City:					District:																																				
08. Permanent Address:																																																			
_____										City:					District:																																				
09. Phone No:(OFF)										(RES.)										Mobile:																															
City Code - Phone No																																																			
10. Email Address:										11.Father/ Gurdain Email:																																									
12. Nationality:										<input type="checkbox"/> Pakistani					<input type="checkbox"/> Other_____					13. Religion:					<input type="checkbox"/> Muslim					<input type="checkbox"/> Non Muslim																					

Academic Information:

Certificate / Degree Level	Degree / Sanad Title	Specialization / Major Subject	Year Passing	Obtained Marks	Total Marks	Board / University / Institute
Matric / Equivalent (10 Years)	<input type="checkbox"/> Matric <input type="checkbox"/> O' Level <input type="checkbox"/> Other: _____	<input type="checkbox"/> Science <input type="checkbox"/> Arts <input type="checkbox"/> Other: _____				
Intermediate / (12 Years)	<input type="checkbox"/> F.Sc <input type="checkbox"/> A' Level <input type="checkbox"/> Other: _____	<input type="checkbox"/> Pre-Medical				
Bachelor / Equivalent (14 Years)	<input type="checkbox"/> B.Sc <input type="checkbox"/> Other: _____					

External Test Information:

Test Title	Test Center	Test Date	Roll No	Obtained Marks	Total Marks	Valid up to
KMU CAT OR _____						

Acknowledgment

Applicant Name _____ Father Name _____ Application

submitted for admission to PIPOS for Session _____ on Dated _____

Dealing Assistant _____

Ph:091-9217520

INSTRUCTIONS

1. Fill the admission form carefully otherwise the Admission Committee of Pakistan Institute of Prosthetic and Orthotic Sciences reserve the right not to entertain any claim made later on the Application.
2. Applicant having less than 50% Marks in qualifying exam are not eligible for admission
3. The Following documents must be attached with the application form in the following order
 - a. Attested copies of all certificate
 - b. Three Passport Size color Photograph (Attested)
 - c. Undertaking complete in all respects to be obtained from the institute.
4. As an Applicant for admission to the Pakistan Institute of Prosthetic and Orthotic Sciences, you are here by undertake that entries made in the admission form are correct and complete to the best of my knowledge and that your admission to the Institute is Provisional and is subject to cancellation if any irregularities found in your admission form /documents. You also undertake that you shall be abide by the Rules and regulation of the PIPOS.

Date _____ / _____ /20____

Applicant's Signature _____

FOR OFFICE USE ONLY

The Applicant Mr./Ms./Mrs _____ having Merit No _____ is _____
for admission in BS Program.

Recommendations and Signature of Members of admission Committee		
1. _____		
2. _____		
3. _____		
4. _____		
5. _____		

Incharge Admission Committee

Managing Director,PIPOS

