

UNIVERSITY OF SARGODH^AForm No. Online download**ADMISSION FORM**
Doctor of Physical Therapy
(05 Year Course) (Annual System)
Mention Year . _____

Mention First Annual or Second Annual Examination 20 ____.

THE CANDIDATE IS DIRECTED TO READ AND COMPLY WITH THE INSTRUCTIONS PRINTED AT PAGE 3 CAREFULLY BEFORE FILLING IN THE ADMISSION FORM. INCOMPLETE ADMISSION FORM SHALL BE REJECTED AND RETURNED FORTHWITH. THE UNIVERSITY SHALL NOT TAKE ANY RESPONSIBILITY FOR THE CONSEQUENCES. PARTICULARS MENTIONED BELOW ARE TO BE FILLED IN BY THE CANDIDATE NEATLY AND LEGIBLY IN HIS / HER OWN HAND WRITING WITH BLUE BALLPOINT / PEN.

**Paste one
attested recent
coloured photo**

Male / Female

1. Name of the College _____
2. Registration No. _____
3. Name of the Candidate in English _____
(Block Letters)
4. National I.D Card No. _____
5. Father's Name in English _____
(Block Letters)
6. Male or Female _____ 6. Religion _____ 7. Nationality _____
7. Fee Paid Rs. _____ Bank Challan No. _____ Dated _____
Habib Bank Ltd. Branch _____
8. Names of compulsory / optional papers in which to appear.
Compulsory / Optional Papers

i). _____	ii). _____
iii). _____	iv). _____
v). _____	vi). _____
vii). _____	viii). _____
ix). _____	x). _____
9. The year of passing F.Sc. or equivalent Examination 1st or 2nd Annual _____
Roll No. _____ Name of the Board _____
11. **Information about Latest Passed Exam:** The year of passing DPT. _____ Year, 1st/2nd Annual Examination 20 ____ Roll No. _____ marks obtained _____ (Only for 2nd, 3rd, 4th, 5th Year candidate)
13. **FOR EXEMPTION / COMPARTMENT CANDIDATES WHO HAVE ALREADY APPEARED IN DPT EXAMINATION AND FAILED.**
Year of appearing in DPT _____. Year ____ 1st /2nd Annual Examination _____ under _____ Roll No. _____ and eligible to reappear in Paper/s.

1. _____	2. _____
3. _____	4. _____
5. _____	6. _____
7. _____	8. _____

- Declaration:** - I hereby declare that:- 1) All the particulars mentioned above are correct and that in case of any difficulty arising out of inaccuracy therein, I shall be responsible for the consequences.
2. I shall not take part in walkout or protest in any paper during Examination.
3. I have read the instructions carefully given at the back of this page & Roll No. Slip and shall abide by them.

Signature of the Candidate

Permanent Home Address

Full Present Address

Price: - 30 Rupees

IMPORTANT INSTRUCTIONS

1. The candidate is directed to read instructions hereunder before filling in the Admission and Fee Receipt Forms carefully. The Admission Form will be liable to be rejected if correct Registered No. is not mentioned or incomplete or incorrect entry is made in the Form. The incomplete Admission Form shall be rejected and returned forthwith. The University shall not take any responsibility for the consequences.
2. Each candidate (Male / Female) must paste latest passport size Photographs, duly attested at the specified places in the Admission Form.
3. The Examination begins on the date/s given in the Date Sheet. Every candidate must keep his / her National Identification Card with him / her in the Examination Hall while taking the Examination.
4. The Admission Form will be entertained only if the attested photocopy of the Registration Card, issued by the University, is attached with the Form alongwith other documents.
5. The candidates must attach attested copies of latest pass result card and Computerized National Identity Card. The compartment/ failed as a whole candidates must attach attested copy of latest fail result card and Computerized National Identity Card.

CERTIFICATE FOR REGULAR STUDENTS

Certified that the applicant has fulfilled the conditions laid down under the statutes enforced in the year of Examination and that:

- a) The student concerned has been on the rolls of the College during the academic year immediately preceding the Examination.
- b) He has attended, not less than two third of the total number of lectures delivered to his class in each paper, separately in theory and practical, during the academic year immediately preceding the Examination.
- c) His performance, as judged through class tests, assignments etc. has been satisfactory.
- d) His / Her character and conduct have been good.
- e) He / She has, passed F.Sc/ previous professional exams in accordance with the prescribed Regulations.
- f) He / She has filled in and signed the Admission Form in my presence, and the particulars filled in by him / her on the reverse are correct and nothing has been concealed.

CERTIFICATE FOR LATE COLLEGE STUDENTS

- a) The late College student concerned was on the rolls of the College during the academic year_____.
- b) He / She attended, not less than two third of the total number of lectures delivered to his class, in each paper, separately in theory and practical during the academic year _____.
- c) His / Her performance as a regular student judged through class tests, assignments etc., was satisfactory.
- d) His / Her character and conduct have been good.
- e) He / She has passed F.Sc /previous professional exam in accordance with the prescribed Regulations.
- f) He / She has filled in and signed the Admission Form in my presence, and the particulars filled in by him / her on the reverse are correct and nothing has been concealed.

FOR THE LATE COLLEGE CANDIDATE PLACED UNDER COMPARTMENT / EXEMPTION

He / She appeared in DPT. _____ Year. 1st /2nd Annual Examination 200 ____ under Roll No. _____ and was placed in compartment or earned exemption and is eligible to reappear in the following paper/s.

Signature of the Principal

Stamp of the Principal

Dated _____

UNIVERSITY OF SARGODHA
FEE RECEIPT FORM
Doctor of Physical Therapy
(05 Year Course) (Annual System)

Form No. Online download

Mention Year _____

Roll No. _____

(To be filled in by the office)

Mention First Annual or Second Annual Examination 20 ____.

IMPORTANT INSTRUCTIONS

1. The candidate is directed to fill in the Admission and Fee Receipt Forms carefully. Incomplete forms shall be rejected and returned forthwith. The Forms will be considered to have reached the University Office when these are received complete in all respects. In all other cases, late fee/double fee will be charged accordingly.
2. The fee is payable through the prescribed Branches of Habib Bank Ltd. on the Challan prescribed for the University of Sargodha. Money Orders, Postal Orders, Bank Drafts and cheques shall not be accepted.

1. Name of the Candidate in English _____
(Block Letters)
2. Father's Name in English _____
3. Registration No. _____
5. **FOR EXEMPTION / COMPARTMENT CANDIDATE WHO HAVE ALREADY APPEARED IN DPT ____ YEAR EXAMINATION AND FAILED.**
Year of appearing in DPT . ____ Prof. 1st /2nd Annual ____ Examination under Roll No. ____ .
6. Fee paid Rs. _____ Bank Challan no. _____ Dated _____
Name of Bank and Branch _____

NOTE: - ORIGINAL RECEIPT OF BANK CHALLAN MUST BE PASTED ON THE BACKSIDE OF THIS FORM

I hereby declare that all the particulars mentioned above are correct and that in case of any difficulty arising out of inaccuracy therein, I shall be responsible for the consequences.

Signature of the Candidate

Dated _____

Full Present Address

Signature of the Principal

Stamp of the Principal

Name & Address of the Candidate

Name & Address of the Candidate

TO BE FILLED IN BY THE OFFICE

	Actual Amount due Rs.	Amount Received Rs.	Receipt No. and date	Amount still due Rs.
Examination Fee Pharm-D				
Double the ordinary Fee				

Reference made by office to the defaulter:-

Letter No. _____ Dated _____

1. Reminder No. _____ Dated _____

2. Reminder _____ Dated _____

(FEE CHALLAN SHOULD BE PASTED HERE)