# Examination Form No.

BEMS i) Ever

1.

Name (in block letters)

UNIVERSITY OF BALOCHISTAN, QUETTA EXAMINATION FORM OF FIRST PROFESSIONAL BACHELOR OF EASTERN MEDICINE AND SURGERY

ANNUAL/SUPPLEMENTARY EXAMINATION, 20\_\_\_\_\_.

Every candidate must keep his/her *C.N.I.C.* with him/her in the examination while Appearing in the examination.

Four latest copies of Photograph must be attached with the examination form. Female Students are not exempted. (To be written by the University Office)

Attach three Copy of Recent Photograph Here

(Female Students Are not exempted)

#### THE CONTROLLER OF EXAMINATION,

University of Balochistan, Quetta.

I request permission to present myself at the *First Professional Bachelor of Eastern Medicine and Surgery* Annual/Supply Examination, of the University of Balochistan, and declare that all the particulars Given below are correct and that incase of any difficulty arising out of inaccuracy there in; I shall be Responsible for the consequences.

(Particulars to be filled in by the candidate neatly & legibly in his/her own hand writing)

English

	Urdu				
2.	Father's Name (in block letters) English				
	Urdu				
3.	C.N.I.C. No Male Female				
4.	Registration Number (UoB Quetta):				
5.	Religion 6. Caste				
7.	Present address: H. No.				
	City: District: Province: Mobile No				
8.	Permanent address (in Full): H. No				
	City: District: Province:				
9.	Year of Passing F.A. /F.Sc. Examination Annual/Supply:				
	Under Roll No From				
10.	Subjects in which to be examine for Bachelor of Eastern Medicine and Surgery First  Professional:-  1. Anatomy 2. Physiology 3. Bio-Chemistry 4. Principal of Eastern Medicine 5. History of Eastern Medicine 6. Islamiat 7 Pakistan Study				
11.	To be filled in by the Compartment Candidates only.				
	Under Roll No Annual/Supplementary Exam 20				
	1 3 4				
	5 6				
12.	I solemnly declare that:- (i)I have read all the instructions. (ii)That I have filled in the Examination Form in my own hand writing. (iii)I am not a student of Double Course.				
Dated:	/				
	(Signature of the Candidate				

# CERTIFICATE

#### I certified that the student:

- (a) He/She is of good moral character.(b) He/She has attended not less than 75% full course of lectures in each of the subject for this
- (c) He/She has satisfactorily performed the work of the class.
- (d) He/She attended not less than 75% of the periods assigned to practical work in the Pharmacy subjects offered by him/her for the examination.
- (e) He/She has filled & signed application overleaf in my presence, and particulars filled in by him/her on the reverse are correct.

Remarks, If any:	
	Si di di la
Office Seal/Stamp	Signature of Head of Department
FEE STATEMENT	
Amount of Fee Paid Rs Challan No  Dated://20	

### Roll No. Slip of First Professional Bachelor of Eastern Medicine

## (To be written by the University Office) Roll No.

Attach One Copy of Your Photograph

& one copy Of CNIC here

University of Balochistan

Note

## (TO BE FILLED IN BY THE CANDIDATE) i) The Candidate will be admitted to the Examination Hall on production & delivery of this

*Roll No. Slip.* Every candidate must keep his/her identification Card with him/her in the Examination Hall while taking the Examination. ii) All Candidates, including females must keep with them their *C.N.I.C.* in the Examination Hall & to be shown when desired by Centre superintendent of University authorities.

UNIVERSITY OF BALOCHISTAN, QUETTA.

Annual/Supplementary Examination 20				Dated://20		
Admit	t		Son / Daughter of			
of the Exam,	-	nent of Eastern Medicine Universit	y of Balochistan, of the Bachelor Centre,	of Eastern Medicine and Surgery First Yea		
>	Selec	t the subject in which to be appear	red.			
	1.	Anatomy				
	2.	Physiology				
	3.	Bio-Chemistry				
	4.	Principals of Eastern Medicine	?			
	5.	History of Eastern Medicine				
	6.	Islamiat				
	7.	Pakistan Study				
 Signat	ture of C	Candidate		Deputy Controller		
-				of Examination		