🔊 UNIVERSITY OF BALOCHISTAN, QUETTA Roll No. **EXAMINATION FORM OF FIRST PROFESSIONAL BDS** ANNUAL/SUPPLEMENTARY EXAMINATION, 20_ (To be written by the University Office) Every candidate must keep his/her C.N.I.C. with him/her in the examination while i) appearing in the examination. Attach two ii) Four latest copies of Photograph must be attached with the examination form. *Female* copy of students are not exempted. recent Photograph THE CONTROLLER OF EXAMINATION, here University of Balochistan, Quetta.

(Female Students are not exempted) I request permission to present myself at the First Professional BDS

Annual/Supply Examination, 20_____ 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)

1.	Name (in block letters) English			
	Urdu	\neg		
2.	Father's Name (in block letters) English	\neg		
	Urdu	\equiv		
3.	C.N.I.C. No.			
4.	Registration Number (UoB Quetta):			
5.	Religion6. Caste6.			
7.	Present address: H.No.			
	City: District: Province: Mobile No			
8.	Permanent address (in full): H. No.			
	City: District: Province:	2 2		
9.	Year of Passing F.A. /F.Sc. Examination Annual/Supply:	EXaminauon Form No.		
	Under Roll No From	n F		
10.	Subjects in which to be examine for BDS First Professional:-			
	1 2			
	3 4	EXa		
	5 6			
11.	To be filled in by the Compartment / Failure Candidates only.			
	Under Roll No Annual/Supplementary Exam 20			
	1 2 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)

The Examination form will liable to be cancelled if correct Registration Number is not mentioned, if incomplete or incorrect entry is made in the form.

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 examination.
- (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 BDS 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:

Office Seal/Stamp

Signature Principal Bolan Medical College, Quetta

FEE STATEMENT

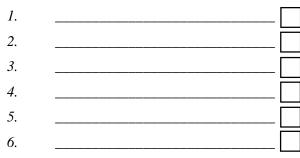
Amount of Fee Paid Rs. _____ Challan No. _____

Dated: ____/20____.

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Page 3 of 3		(To be written by the		
	Roll No. Slip of First Professional BDS	University Office) Roll No.		
	(TO BE FILLED IN BY THE CANDIDATE)			
Note Roll No. Examina ii) All Cano Hall & t	ndidate will be admitted to the Examination Hall on production & deliver . <i>Slip</i> . Every candidate must keep his/her identification Card with him/h ation Hall while taking the Examination. didates, including females must keep with them their <i>C.N.I.C.</i> in the Exam o be shown when desired by Centre superintendent of University authori UNIVERSITY OF BALOCHISTAN, OUET	her in the umination ities. Copy of Your Photograph & One copy of CNIC here		
Annual/Supplementary Examination 20 Dated://20				
Admit Son / Daughter of				
of the Bolan Medical	College, Quetta of the BDS First Professional Exam, at			
(Centre,			

> Select the subject in which to be appeared.



Signature of the Candidate

Deputy Controller (Conduct) for Controller of Examination University of Balochistan