



**MEDICAL TEACHING INSTITUTIONS
MARDAN COLLEGE OF MEDICAL TECHNOLOGY
BACHA KHAN MEDICAL COLLEGE
MARDAN**

4 PASSPORT
SIZE
PICTURES

**ADMISSION FORM FOR RESERVED SEAT OF
MTI MARDAN EMPLOYEES/CHILDREN
SESSION 2021**

Program Offered:

- *BS Anesthesia Technology*
- *BS Cardiology Technology*
- *BS Dental Technology*
- *BS Medical Laboratory Technology*
- *BS Radiology Technology*

Section A

- (For MTI Mardan employee)

Program applying for: _____

Section B

- (For MTI Mardan employee's child)

Program applying for: (Please mention the technology according to your priority/choice)

First priority	
Second priority	
Third priority	
Fourth priority	
Fifth priority	

Name: _____ Father /Husband Name: _____
(As per SSC certificate in BLOCK letters)

Date of birth (DD/MM/YY): ____ / ____ / ____ Gender: M / F: _____

Married/Unmarried: _____ Place of Birth: _____

Domicile District: _____ Nationality: _____

Address: _____

Phone: (Res) _____ (Cell) _____

Email address: _____

Permanent address: _____

Hafiz-e- Quran : Yes No

(In case of Yes, please attach Valid Certificate issued from government approved Madrassah)

Emergency contact details:

Name: _____ Relationship with applicant: _____

Address: _____

Cell No _____ Phone: _____

Particulars of MTI-MMC/BBCH/BKMC/BKCD/MCNM/MCMT Employee

Name of Applicant	Name of Employee	Designation/Department	Relationship with Applicant
			Self <input type="checkbox"/>
			Child <input type="checkbox"/>

It is hereby certified that the above candidate has been permitted for admission in said seat and above data is verified with office record and found it correct.

Signature / Stamp of Head of Institute

ACADEMIC QUALIFICATION

Qualification	Year of passing	Marks Obtained	Total marks	Percentage	Name of Board
Matric					
F.Sc Pre-Medical/Medical Technology					
KMU CAT test (In case of employee's child)					
Others equivalent qualification (with IBCC Certificate)					

Father /Guardian Name: _____ Occupation: _____

Exact Relationship with the Guardian: _____

Certified that the facts provided are correct to the best of my knowledge:

Signature of the Applicant's Father/Guardian

CNIC No: _____

Date: _____

Signature of the Applicant

CNIC No: _____

Date: _____

Note: Incomplete application will not be processed.

Attested copies of the following documents must be attached with the application form in the following sequence:

(Tick the relevant box for the attached documents)

- A copy of Secondary School Certificate & DMC (Science/Equivalent).
- A copy of Higher Secondary School Certificate & DMC (FSc: Pre-Medical).
- A copy of KMU CAT test result card.
- A copy of Domicile certificate.
- A copy of Computerized National Identity Card of the candidate.
- A copy of Computerized National Identity Card of the father/guardian of the applicant.
- Four passport size coloured photographs of the applicant attested on the back.
- IBCC certificate in case of equivalency.
- A copy of Hafiz e Quran Certificate.
- NOC from Head of Institute.