



OFFICE OF THE PRINCIPAL
NISHTAR MEDICAL COLLEGE, MULTAN.
Phone No. +92-61-9200238, Fax No. +92-61-9200227,
e.mail: students.section@nmuc.edu.pk
Nishtar Medical College, Nishtar Road, Multan.

No./ 49 /NMC,

Dated the 10-01-2024.

NOTICE

SUBJECT: - **ADMISSION IN TO FIRST YEAR MBBS CLASS FOR THE SESSION 2023-24.**

With reference to applications submitted by candidates for admission in Government Medical Colleges & Universities in the Punjab, I am pleased to inform that (provisionally) admission process has been started for First year MBBS class at Nishtar Medical College, Multan, subject to verification of candidate's credentials, etc.

All **male & female** candidates are hereby directed to report to the Chairman Admission Committee of this College in the Prof. Dr. Hayat Zafar Auditorium of Nishtar Medical College, Multan according to the schedule given below:

Female : **15.01.2024 (Monday) at 9:00 a.m. to 01:00 p.m.**
Male : **16.01.2024 (Tuesday) at 9:00 a.m. to 01:00 p.m.**

1. If admitted (provisionally), candidates will have to immediately pay the following dues, failing which will not become a bonafide student and will not be issued Roll Number.
 - i. College Fee **Rs. 15,338/-**
 - ii. Those students who desire to get hostel accommodation should deposit **Rs. 41,540/-** as hostel fee for one year (First year MBBS) along hostel accommodation form with three passport size & ¾ size photograph, CNIC / B Form, F.Sc / A Level certificate and domicile photocopy. **Provisional Hostel Accommodation will be provided to the students during office timing (i.e. 08:00 AM to 03:00 PM) on 30.01.2024 (Tuesday for Boys) at Iqbal Hall Boys Hostel & 31.01.2024 (Wednesday for Girls) at Tariq Hall Girls Hostel.** However, permanent allotment will be made later on.

Following documents are required for hostel accommodation:

- i. Student CNIC / B form
 - ii. F.Sc. (Pre-Medical) / A-level certificate
 - iii. Two (02) passport size & Two (02) 3"x4" size photographs with blue background (name written on the back side)
2. Additional charges will be levied if heaters, desert coolers or refrigerator are used in the hostel rooms. Use of Air-Conditioners in the hostel rooms is strictly prohibited.
 3. In case of shifting / up-gradation to any other Govt. Medical University / College in Punjab, the tuition fee deposited by candidates will be transferred to that Universities / Colleges. The hostel fee will also be transferred after deduction of the dues for the period during which candidates stayed in the hostel.
 4. **Candidates should bring the following original documents along with 08 photocopies of each document attested by a Gazetted Officer of BS-17 or above.**
 - iv. Student CNIC / B form
 - v. Father CNIC
 - vi. Matriculation / O-level certificate

- vii. F.Sc. (Pre-Medical) / A-level certificate
- viii. Domicile certificate
- ix. Detailed marks certificate of F.Sc. (Pre-Medical) examination
- x. Hafiz -e-Quran certificate (if applicable)
- xi. **Board Migration Certificate / NOC (if you passed F.Sc from another board outside of Punjab Province)**
- xii. Affidavit & Surety Bond (specimen enclosed) for students being admitted on open merit & all reserved seats
- xiii. Medical Fitness Certificate (specimen enclosed)
- xiv. Twelve (12) passport size photographs with blue background (name written on the back side)
- xv. MDCAT result certificate
- xvi. **COVID-19** vaccination certificate 6 photocopy on A4 size paper

Note: - I. The certificate mentioned at No. x may be obtained from a Registered Medical Practitioner (either a Medical Officer in a Govt. Hospital or a private practitioner registered with Pakistan Medical Commission / PM&DC). PMC / PM&DC number must mentioned on medical certificate.

II. Verification of documents fee will be charged as required by the concern Board (Notified later on).

5. Candidates are advised to keep sufficient number of Photostat copies duly attested of all certificates because the original certificates & photocopies will be retained in the College office and will be handed over to candidates only when candidates leave the College.
6. If admitted (provisionally) on the basis of the statements given in your application and the certificates submitted by you, but if subsequently, at any time during the course of studies, it is found that any of the statements or certificates is false, you will be expelled from the College and, in that case, all fee and other dues paid up to the date of expulsion shall be forfeited in favour of the Government and you will also be liable to any legal action which may be considered appropriate.
7. Candidates are expected to know all the relevant rules and regulations given in the University Prospectus and the College calendar. In case need any further guidance / information, contact the Principal Office (Students' Section).
8. Regular First year MBBS classes will start w.e.f. **1st February, 2024 (Thursday)**, according to the time table issued by the College office.
9. **If any candidate fails to submit the College fee along with required documents / certificates on the date mentioned above, will be considered absent and this information will be sent to the Chairman Admission Board, University of Health Sciences, Lahore.**

**PRINCIPAL
NISHTAR MEDICAL COLLEGE
MULTAN**

FOR ALL STUDENTS AFFIDAVIT

Annexure

(Note: - serial no.1 to be filled in case of already admitted to any medical Institute).

1. I, Mr. / Miss, _____
S/O/ D/O _____ solemnly declare that I am admitted in _____
_____ year class of _____ in _____ name of the college _____, _____,
Punjab on Merit. However, I am desirous of getting admission in a Government Medical Institution of the
2. I solemnly pledge that if offered admission to first year class of a Government Medical / Dental Institute of the Punjab, I will forgo my previous admission, any credit of examinations passed and previously paid dues.
3. I also declare that I have not been expelled / debarred for admission under any provision of the prospectus.
4. I, _____ S/O/ D/O _____
Resident of _____
do hereby solemnly declare that I will abide by the discipline, rules and regulations of Nishtar Medical College, Multan as enforced at present and made from time to time by the College authorities in future. I will concern myself only with the academic activities and such extra- curricular activities, which are allowed by the College. I further declare that I will not take part in any political or partisan activity or agitation of any kind. I will regularly pay the College dues.
5. If I violate the above affidavit, I shall be liable to the appropriate punishment as prescribed in the prospectus of the University of Health Sciences, Lahore.

(Name of father / guardian)

(Name of student)

Sign: _____

Sign: _____

Name: _____

Name: _____

CNIC: _____

CNIC: _____

Address: _____

Address: _____

WITNESSES:

(Witness-I)

(Witness-II)

Sign: _____

Sign: _____

Name: _____

Name: _____

CNIC: _____

CNIC: _____

Address: _____

Address: _____

FOR ALL STUDENTS
SURETY BOND (Specimen)

Annexure-II

Know all men / women by these presents here that we

(i). _____
(Name of the student with complete address)

(ii). _____ (Surety)
(Name of the father / guardian with complete address)

do bind ourselves, our heirs, executors and administrators jointly and severally that I will serve Government of the Punjab, Health Department, as "Probationary Medical Officer / Women Medical Officer" in the primary healthcare facilities for a period of one year after completing the foundation year / house job. In case, I fail to fulfill the commitment, **I shall be liable to pay on demand a sum of Rs.03 million (Rupees: thirty lac only)** to Government of the Punjab, Health Department.

The condition of the above bond is that if the said student would fulfill the commitment in letters and spirit according to the Notification No. SO (ME) 9-4 /2015 (P), dated 17.08.2015, issued by Government of the Punjab, Health Department, Lahore, then the above bond shall be void and of no effect, otherwise it shall remain valid for any legal action against the said student (doctor) / surety.

(Name of father / guardian)

Sign: _____

Name: _____

CNIC: _____

Address: _____

(Name of student)

Sign: _____

Name: _____

CNIC: _____

Address: _____

WITNESSES:

(Witness-I)

Sign: _____

Name: _____

CNIC: _____

Address: _____

(Witness-II)

Sign: _____

Name: _____

CNIC: _____

Address: _____

ATTESTED BY THE JUDICIAL MAGISTRATE FIRST CLASS

SURETY BOND (Specimen)**ANNEXURE-I**

(To be submitted in the college where the candidate is admitted on minimum Rs.50/- stamp paper for admission against under developed districts' seats)

1. It is certified that Mr./Ms. _____
_____ S/O, D/O, _____ is a permanent resident of district _____.
2. I (student) solemnly declare that if admitted in MBBS/BDS against reserved seats of district _____, I will serve in my district for five years after graduation or in default I will be liable to pay Rs.5,00,000/- to the Government of the Punjab in addition to any other amount pledged by me at the time of admission.
3. I solemnly pledge that in case I am admitted against Open Merit as well as Reserved Seat, I will avail only one seat by my choice and let the other seat forgo, by submitting a written statement.
4. I (father) solemnly declare that the statement made above by my son/daughter is true and in case of violation the candidature/admission of my son/daughter will be cancelled.
5. I (father) solemnly declare that after graduation, my son/daughter will serve in the district _____ for five years and in case of violation I will be liable to pay Rs.5,00,000/- to the Government of the Punjab in addition to any other amount pledged by him/her on account of my son/daughter as a fine or my son/daughter will be liable to any legal action which the government may deem fit to take.

Witness-I:_____
Signature of the candidate_____
Name of the candidate**Witness-II:**_____
Signature of the father/guardian_____
Name of the father / guardian

*MBBS/BDS Prospectus, Session 2023-24
Printer Friendly Version*



NISHTAR MEDICAL COLLEGE, MULTAN

MEDICAL FITNESS CERTIFICATE

Name: _____

Father's Name: _____

Gender: _____ Age: _____

1. Weight: _____ (kg) Height: _____ (cm) BP: _____

2. Blood Group: _____ 3. Lungs: _____

4. Heart: _____ 5. Vision Left Eye: _____ Right Eye: _____

Details of Glasses (if worn): _____ 6. Hearing: _____

7. Any Impediment in Speech: _____

8. Any Disability: _____

9. Any Neurological / Psychiatric Disease, (if yes, please give details): _____

10. full course of vaccination against **Hepatitis B Virus**: _____

11. Any Significant Disease Diagnosed in the past: _____

12. fully vaccinated against **tetanus**: _____

13. Taking any medicine on regular basis (if yes, please give details): _____

14. Allergies if any: _____

15. Any Communicable / Contagious Disease: _____

16. Mark of Identification: _____

I certify that I have examined Mr. / Miss. _____
S / D / O. _____ who is an applicant for admission to
MBBS Program in Nishtar Medical College, Multan and could not notice that he / she has any physical or
mental disease and is **FIT** for undertaking studies.

Signature of doctor with Legible seal

PM&DC / PMC No. _____

Dated: _____

Signature of Candidate (in presence of doctor)

Dated: _____