

# MUHAMMAD MEDICAL COLLEGE & HOSPITAL MIRPURKHAS

## **APPLICATION FORM FOR HOUSE JOB / INTERNSHIP PROGRAM**

I wish to apply for the House Jo	b in the Department of	
at Muhammad Medical College	& Hospital, starting from	
for a period of six months. My F	Particulars are as below:-	
Name:		
F/Name:		PHOTOGRAPH
Date of Birth:		
CNIC No:		
Qualification:	Year of Qualification: _	
From: (Name of College & Unive	ersity)	
	PM&DC Reg. No	
Address:		
Present Address:		
Permanent Address:		
Contact No		
Fmail Address:		

# **Educational record in Chronological order:**

S. No.	Level of Education	Year of Passing	Institute/Board/ University	Grade/ Distinction

The information provided above is true and correct to the best of my knowled	ge
& belief.	

S	ignature d	of Appl	icant

### Note: Please enclose following supporting documents:

- 1. 2 copies of CNIC/SNIC & 3 Photographs (Two Passport size and one small).
- 2. Educational certificates of Matriculation/O level & above.
- 3. PM&DC registration certificate.
- 4. Any other relevant certificate/ Document
- 5. Address, Contact No: and Email (At least two).

### **For Office use:**

Application received on	Documents verified and found correct
Ву:	Yes/No – reason:
	Signature
Recommended by	Final Approval by
Chairman House Job	Competent authority:
Committee:	