Attach two photographs with STAPLER attested from backside

GULAB DEVI EDUCATIONAL COMPLEX
AL ALEEM INSTITUTE OF NURSING

FEROZEUPUR ROAD , LAHORE – PAKISTAN
Ph. No. +92 42 3518040, +92 42 99230247, (Ext. 3091 – 99),+92 333 444 3356
www.gdec.edu.pk *Email: admission@gdec.edu.pk*

Paste 1 Photograph, attested from front.

"DO NOT USE STAPLER"

(There should be NO stamp mark on face)

ADMISSION FORM

☐ BSc. Nursing (4 years) ☐ Post Basic Specialization OT ☐ Post Basic Specialization CCU

☐ Midwifery ☐ Other _____

FILL FORM IN CAPITAL LETTERS

1. **Student Full Name** _____
2. **Mother Name** _____ **Student CNIC** _____
3. **Father Name** _____ **Father CNIC** _____
4. **Date of Birth** _____ **Marital Status** _____ **Blood Group** _____ **City** _____
5. **District of Domicile** _____ **Student Cell No.** _____
6. **Father Cell No.** _____ **Residence No.** _____
7. **Religion** _____ **Present Address** _____

   _____
8. **Permanent Address (In case of same address, please write "As Above")** _____

   _____
9. **Particular of Qualification**

Qualification	Roll No.	Registration No.	Marks Obtained	Total Marks	No. Of Attempts	College / University
SSC / Matric /O-Level or Equivalent						
HSSC / FA / FSc. / A-Level or Equivalent						
General Nursing						
Midwifery						
Generic Nursing						
Any Other						

10. **Father Occupation** ☐ **Job** ☐ **Business** ☐ **Unemployed** _____
11. **Mother Occupation** ☐ **Job** ☐ **Business** ☐ **Housewife** _____
12. **Father Job Tittle** _____ **Mother Job Tittle** _____
13. **Family Monthly Income** _____ **No. of Siblings** _____

14. Detail of any Distinction : _____

15. Honors or Medal : _____

16. How did you find us: ☐ **Relatives** ☐ **Friends** ☐ **TV / Newspaper / SMS**

☐ **Social Media** ☐ **Google** ☐ **Website** ☐ _____

DECLARATION

I do hereby declare that the above particulars are correct in every aspect and that I have not concealed anything. I also agree to appear in the entrance examination for the selection of the candidate for the course if decided by the Al Aleem Institute of Nursing, Gulab Devi Educational Complex, Lahore. I also agree that after attending the course for three months, if I do not give satisfactory progress, I may be taken off further courses. Furthermore, I do hereby declare that I shall abide by the rules and regulation of the institute as well as rules and regulations of the relevant university, which are formed from time to time during the course. In case of violation, I may be expelled from the institute and I shall not claim any refund of dues paid by me. I do hereby declare that I am not concealing any information, which depares me from applying for any course in the relevant university/council.

_____

Dated: _____ **Candidate's Signature**

* **Note:** Al Aleem Institute of Nursing reserves the right to change fee policy & fee structure at any time without prior notice.

Student Name _____

Father Name _____

Program _____ Session _____

Blood Group _____ Card Expiry _____

Paste 1 photograph without attestation

"DO NOT USE STAPLER"

COLLEGE COPY

ROLL NUMBER SLIP

Name of Candidate _____ Program Applied For _____

Roll No. _____ Dated _____ Diary No. _____

INCOMPLETE APPLICATION WILL NOT BE ENTERTAINED

The candidate must tick the documents, which are attached by him/her

- ☐ 5 Latest (Passport Size) Photographs with blue background *(two without attestation, one attested from front side, two attested from back side. Photographs attested from back side, must be attached with stapler on front page of form)*
- ☐ Two attested copies of Candidate's CNIC / B-Form.
- ☐ Two attested copies of Father's CNIC.
- ☐ Two attested copies of Matric Certificate.
- ☐ Two attested copies of FSc. (Pre Medical) Certificate.
- ☐ Two attested copies of Nursing Diploma or Degree.
- ☐ Duly attested affidavit on a judicial paper of Rs. 50/-
- ☐ Rs 1000/- Bank Draft in favor of "**Gulab Devi Educational Complex**" (In Case of Post).
- ☐ No Objection / Migration Certificate from the previous board. *(After admission confirmation except for Lahore Board).*
- ☐ No Objection Certificate from Respective Organization.

_____ _____

Signature of Candidate **Left Thumb Impression** **Right Thumb Impression** **Checked By**

STUDENT COPY

ROLL NUMBER SLIP

Name of Candidate _____ Program Applied For _____

Roll No. _____ Dated _____ Diary No. _____

INCOMPLETE APPLICATION WILL NOT BE ENTERTAINED

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Paste 1 photograph without attestation

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_____ _____

Signature of Candidate **Checked By**