Attach two photo STAPLER atteste	ographs with ed from back	GULAB DEV	I EDU	CATIO	NAL CO	MPLEX	
CULABOR OF THE DUCATION	ATT COM	Ph. No. +92 42 351804	0, +92 42 99	9230247, (Ext.	E — PAKISTAN 3091 — 99), +92 sion@gdec.edu.pk		Paste 1 Photograph, attested from front
GULA	MPLEX						(There should be no stamp mark on face)
- Bin	Similar	ADN	<b>IISS</b>	ION	FORM	N	
Califications							
							SESSION
		D DIPLOMA OF P CK DISCIPLINE OF			NCES		
	🔲 Medical Laboratory Technician 🔲 Operation Theater Technician 🔲 Anaesthesia Technician						sia Technician
	🔲 Radiology & Imaging Technician 🔲 Ophthalmic Technician 🔲 Dispenser 🛛 Other:						
	FILL FORM	IN CAPITAL LETTERS	5				
1.	Student Full	Name					
2.	Mother Nam	ne			Student CNIC _		
3.	3. Father Name				Father CNIC		
4.	4. Date of Birth Marital Status Blood Group City						
5.	District of De	omicile			Student Cell N	0	
6.	Father Cell N	lo			Residence No.		
7.	Present Add	ress					
8.	Permanent A	Address (In case of san	ne address, p	olease write "	'As Above")		

9. Particular of Qualification

Qualification	Roll No.	Registration No	Marks Obtained	Total Marks	%	Board
Matric/ O Level or Equivalent						
	Subject	Biology	Physics	Chemistry	Total	%
Sciences Subject	Obtained Marks					
Other						

10. Father Occupation	dol 🗌	Business	Unemployed	
11. Mother Occupation	dol 🗌	Business	Housewife	
12. Father Job Title			Mother Job Title	
13. Family Monthly Income			No. of Siblings	
14. Detail of any Distinction	:			
15. Honors of Medal	:			

### **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 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 debates me from applying for any course in the relevant university.

Dated: \_\_\_\_

#### Candidate's Signature

## **IMPORTANT INFORMATION REGARDING ADMISSION**

Diploma in Paramedical sciences: Matric (Science) or with at least overall 45% unadjusted marks as well as 45% marks in Biology, Chemistry, Physics.

#### **ADMIN COPY**

# **ROLL NUMBER SLIP**

Name of Candidate			Program Applied For					
Roll N	lo Da	ated	Diary No					
	INCOL	VIPLETE APPLICATION WI	LL NOT BE ENTERTAINED					
The c	andidate must tick the docu	iments 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 Fa	vies of Father's CNIC.						
	Two attested copies of Matric Certificate.							
Two attested copies of FSc. (Pre Medical) Certificate.								
Duly attested affidavit on a judicial paper of Rs. 50/-								
	Rs 500/- Bank Draft in fav	or of "Gulab Devi Education	al Complex" (In Case of Post).					
	No Objection / Migration	Certificate from previous bo	ard. (After admission confirmation exc	ept from Lahore Board)				
	Signature of Candidate	Left Thumb Impression	Right Thumb Impression	Checked By				
Stu	ident Name							
Fat	her Name			Paste 1 photograph				
Pro	ogram	Sess	ion	without attestation				
J								
BIC	ood Group	Card	Expiry					
				STUDENT COPY				
		ROLL NUME	<u>BER SLIP</u>					
Name	e of Candidate		Program Applied For					
			Diary No					
	INCOM	PLETE APPLICATION WIL	L NOT BE ENTERTAINED					
The ca		nents which are attached by I						
		-		from front side, two attested				
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 Fat							
	Two attested copies of Matric Certificate.     Paste 1 ph							
	Two attested copies of FSc	. (Pre Medical) Certificate.						
	Duly attested affidavit on a	a judicial paper of Rs. 50/-						
	Rs 500/- Bank Draft in favo	or of <b>"Gulab Devi Educationa</b>	I Complex" (In Case of Post).					
	No Objection / Migration (	Certificate from previous boa	rd. (After admission confirmation exce	pt from Lahore Board)				

# DRAFT OF AFFIDAVIT

I, Mr./Miss	_S/o/D/o:
holder of NIC #:	resident of:

\_\_\_\_\_ do herby solemnly affirm and

declare as under:

That all copies of the certificates attached with my application form are genuine and I shall be responsible for any discrepancies that are arisen later on. I also declare that after attending the course for three months if I do not give satisfactorily progress I may be taken off further Course. Furthermore, I do hereby declare that I shall abide by the rules & regulations of the institute as well as rules and regulation of 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 the dues paid by me. Moreover, the particulars which I have given in my application form are correct to the best of knowledge & belief. I also hereby declare that I am not concealing any information which prohibits me from applying for this course in any institute affiliated with the relevant university. I also agree with the rules that admission will be finalized after the enrolment by relevant university. In case, relevant university objects, rejects or cancels the admission, the institute will not be responsible for any litigation and I shall not claim refund of dues paid by me.

Signature of Candidate:

Verified on Oath at \_\_\_\_\_\_ on Dated: \_\_\_\_\_\_ that above contacts are correct

and true to the best of my knowledge and belief and nothing has been concealed.

Signature & Stamp of Oath Commissioner: