

Registration No. \_\_\_\_\_

Filled by NTS



## REGISTRATION FORM

## Federal Medical &amp; Dental College Islamabad

## MBBS Admission Test Session 2012



**Picture 1**  
Paste your recent passport size color photograph with gum

Provide 2 recent photograph both are pasted in photograph column

## Eligibility Criteria:

A. I have passed my F.Sc or equivalent degree with (Physics, Chemistry & Biology)	<input type="checkbox"/> Yes	<input type="checkbox"/> No				
B. I have secured more than <b>60% marks</b> in F.Sc or equivalent with (Physics, Chemistry & Biology).	<input type="checkbox"/> Yes	<input type="checkbox"/> No				
If Yes then Write Your F.Sc Or equivalent degree Total/ Obtained Marks	<table border="1"> <tr> <th>Total</th> <th>Obtained</th> </tr> <tr> <td> </td> <td> </td> </tr> </table>		Total	Obtained		
Total	Obtained					

If your reply is "Yes" for A & B above, only then please proceed further. Otherwise you are not eligible to apply.

## Bank Online Deposit of Rs: 1200/- from Designated Bank Branches.

Bank Name & Code	Deposit Date
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**\*Note: Application Form will not be entertained without Original Deposit Slip (NTS Copy) having Bank Stamp on slip.**

## 1. Domicile Fill Only One Box (Mandatory)

1. <input type="checkbox"/> Punjab	4. <input type="checkbox"/> Sindh Urban	7. <input type="checkbox"/> AJK
2. <input type="checkbox"/> Khyber Pukhtoonkhwa	5. <input type="checkbox"/> Sindh Rural	8. <input type="checkbox"/> Gilgit-Baltistan, FATA
3. <input type="checkbox"/> Balochistan	6. <input type="checkbox"/> Federal Capital Territory	

## 2. Desired Test City Fill Only One Box for Desired Test City (Mandatory)

(Subject to a minimum of 100 candidates, other wise the candidates will be assigned next nearest test city)

1. <input type="checkbox"/> Islamabad	4. <input type="checkbox"/> Peshawar	7. <input type="checkbox"/> Faisalabad
2. <input type="checkbox"/> Lahore	5. <input type="checkbox"/> Quetta	8. <input type="checkbox"/> Muzaffarabad
3. <input type="checkbox"/> Karachi	6. <input type="checkbox"/> Multan	9. <input type="checkbox"/> Sukkur

## Personal Information: Use CAPITAL letters and leave spaces between words.

3. Name in Full:																																							
4. Father's Name:																																							
5. Candidate CNIC# :																																							
Mandatory (write your own CNIC No also attached the photocopy of your CNIC. Other wise you are not Eligible )																																							
6. Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female																																					
7. Date of Birth:	<table border="1"> <tr> <td>D</td><td>D</td><td>-</td><td>M</td><td>M</td><td>-</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> </tr> </table>																			D	D	-	M	M	-	Y	Y	Y	Y	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D	D	-	M	M	-	Y	Y	Y	Y																														
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																														
Write your Correct Date of Birth other wise you will be rejected																			8. Email:																				
9. Postal Address:																																							
(All correspondence will be made on this address)																																							
City:										District:																													
10. Phone No: (OFF) (RES.) (Mobile)																																							
(City Code - Phone No)																																							
11. Are your Father or Mother Federal Government Employee? <input type="checkbox"/> Yes <input type="checkbox"/> No																																							

## 12. Academic Information: (Please attached your required document)

- Note:** 1. NTS will not issue Roll No Slips to those who have not given their academic record accordingly.  
2. O-Level & A-Level Candidates should convert their Grades into Marks  
3. Candidate having Above 60% In F.Sc (higher secondary school) examination or equivalent with (Physics, Chemistry & Biology) From IBCC are eligible.

Certificate / Degree Level	Degree Name & Subject	Year Passing	Obtained Marks	Total Marks	Institute/Board
SSC/ O-Level (10 Years Degree)					
HSSC/ A-Level (12 Years Degree)	<input type="checkbox"/> F.Sc (Pre Medical) <input type="checkbox"/> Equivalent Degree With (Physics, Chemistry & Biology)				

### Undertaking By The Applicant:

I \_\_\_\_\_ d/s/w of \_\_\_\_\_ do hereby solemnly affirm that I have read and understood the conditions for appearing in the NTS Test and that I have filled the form as per instructions given above and in the event any information contained herein is found to be untrue, I shall be liable to disciplinary action which may result in cancellation of my test.

Date: \_\_\_\_\_

Signature of the Candidate \_\_\_\_\_

**Picture 2**  
Paste your  
recent  
passport size  
color photograph  
with Stapler

Provide 2 recent photograph  
both are pasted in photograph column

- Attach your SSC/ O-Level , HSSC/ A-Level, Domicile Certificate, CNIC copy, Photograph & Original Bank Deposit Slip NTS Copy..
- By Hand submission of Application Form is not allowed.
- Mobile Phones are not allowed in Test Center premises.

### Help line:

**Phone No.** ISB: 051-9258478-79  
LHR: 042-99239258  
KHI: 021-35215013  
PES: 091-9218233  
**Website:** [www.nts.org.pk](http://www.nts.org.pk)  
**E-mail** [info@nts.org.pk](mailto:info@nts.org.pk)

### Send Application Forms to:

**Manager Operations**  
**National Testing Service**  
**402, Street No. 34, Sector I-8/2,**  
**Islamabad.**



# National Testing Service

Building Standards in Educational and Professional Testing


**NTS COPY**


Branch Code: \_\_\_\_\_ Date: \_\_\_\_\_


Branch Name: \_\_\_\_\_


## ONLINE DEPOSIT SLIP

(\* Please deposit fee in only one bank & tick the relevant bank)

 <b>Allied Bank Limited</b> <small>(Formerly Allied Bank of Pakistan Limited)</small>		<input type="checkbox"/>
Remote Branch:	I-8 Markaz Branch Islamabad (0947)	
A/C Title:	NTS-Collection	A/C No. 01-167-0006-4
Note: Bank Service Charges <b>Free of Cost</b>		

 <b>Muslim Commercial Bank</b>		<input type="checkbox"/>
Remote Branch:	I-8 Markaz Branch, Islamabad (1501)	
A/C Title:	NTS-Collection	A/C No. 0041749181000999
Note: Bank Service Charges <b>Free of Cost</b>		

 <b>UNITED BANK LTD.</b>		<input type="checkbox"/>
Remote Branch:	Cantt Br Rawalpindi (0041)	
A/C Title:	NTS-Collection	A/C No. 011-2530-9
Note: Bank Service Charges <b>Free of Cost</b>		

 <b>HABIB BANK LTD.</b> <small>THE POWER TO LEAD</small>		<input type="checkbox"/>
Remote Branch:	H9 Shalimar Recording Co ISB (1742)	
A/C Title:	NTS-Collection	A/C No. 1742-79002786-03
Note: Bank Service Charges <b>Free of Cost</b>		

**\*Note:** Desired Bank Stamp is required on the Deposit Slip & Send Original Deposit Slip (NTS Copy) along Application Form to NTS Office

Application Form will not be entertained without Original Deposit Slip (NTS Copy)

Applicant's Name:	
Father Name:	
CNIC No/ B Form No:	

Amount Rs:	<b>1200/-</b>	Amount in word: Rs.	<b>One Thousand Two Hundred Rupees Only.</b>
Non Refundable/ Non Transferable			

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Cashier

\_\_\_\_\_  
Officer



# National Testing Service

Building Standards in Educational and Professional Testing


**BANK COPY**


Branch Code: \_\_\_\_\_ Date: \_\_\_\_\_


Branch Name: \_\_\_\_\_


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 <b>Allied Bank Limited</b> <small>(Formerly Allied Bank of Pakistan Limited)</small>		<input type="checkbox"/>
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A/C Title:	NTS-Collection	A/C No. 01-167-0006-4
Note: Bank Service Charges <b>Free of Cost</b>		

 <b>Muslim Commercial Bank</b>		<input type="checkbox"/>
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Cashier

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Officer