



# Application Form

Photograph  
1 x 1 Size to  
be attested  
after Pasting

## School of Medical Technologists and Paramedics, HITEC-IMS Taxila Cantt Session 2023-2025(Batch-VIII)

<b>Category applied for:</b>	Medical Lab Technology <input type="checkbox"/>	OT Technology <input type="checkbox"/>	Dental Technology <input type="checkbox"/>	Radiography & Imaging Technology <input type="checkbox"/>	
	Physiotherapy Technology <input type="checkbox"/>	Central Sterile Services Tech <input type="checkbox"/>	Public Health Technology <input type="checkbox"/>		
<b>If applying for more than one category, give your Preference of choice</b>	Preference I _____ Preference II _____				
<b>HIT Employee Ward:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, Father's Grade/ID _____)				
<b>Name of the Applicant: (in block letters)</b>					
<b>Date of Birth:</b>	Date _____ Month _____ Year _____				
<b>CNIC/B-Form Number (NADRA):</b>	_____ - _____ - _____				
<b>Father's Name:</b>					
<b>Father's CNIC No :</b>	_____ - _____ - _____				
<b>Domicile District</b>					
<b>Permanent Home Address:</b>					
<b>Present Address:</b>					
<b>Applicant's Mobile No:</b>			<b>Father's Mobile No:</b>		
<b>Qualification:</b>		<b>Total Marks</b>	<b>Obtained Marks</b>	<b>Percentage</b>	<b>Name of Institute</b>
	<b>Matric</b>				
	Physics				
	Chemistry				
	Biology				
	<b>FSC</b>				

☐ I confirm that all the information provided in this application form is complete, factual and correct. I understand that my admission will be cancelled at any time if above information is proved false.

Signature of Applicant: \_\_\_\_\_

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

**Attested copies** of documents attached (Please tick the relevant Box):

### Requirements:

1: Matric Certificate	08	2: CNIC/B-Form	08	3: Domicile Certificate	08	4: Photographs	08
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For Official Use Only:

College Roll Number: \_\_\_\_\_

Punjab Medical Faculty Registration no: \_\_\_\_\_

**Postal Address: Paramedics Admission Office, HITEC-Institute of Medical Sciences, HIT, Taxila Cantt.**

**Contact: 0347- 4718839**

**Email: Paramedics.school@hitec-ims.edu.pk**