Seat No._____

ADVANCED STUDIES & RESEARCH BOARD
UNIVERSITY OF KARACHI

The Registrar,
University of Karachi
Karachi-75270

ENTRANCE TEST FORM 2019

Photo Size
3 x 3.5 cm

I wish to seek admission to M.Phil., Ph.D. & M.S.(Surgery), M.D.(Medicine) Program in the subject _____ (Department/Center/Institute) _____

Name in Full (Block Letters as in metric certificate) _____

National I.D. Card No. | | | | | | --- | | | | | | | | --- | |

Father's Name (Block Letters as in metric certificate) _____

Postal Address:_____

_____

Telephone (Res.) _____ Off. _____ Cell _____ Email _____

If employed, nature of employment (Full particulars with address of employer _____

_____

_____

Academic Record:

I. Name of Last Examination Passed_____
II. Subject _____
III. Division or Class/CGPA_____ Year _____
IV. University/Institution_____

_____
Signature of Applicant

Attached Documents: **Attested copy of last transcript/marks statement, Attested copy of CNIC, Two (2) recent passport size photographs & paid Fee Voucher.**

Postgraduate Admission 2019

Admit Card 2019

Seat No._____

ADVANCED STUDIES & RESEARCH BOARD
UNIVERSITY OF KARACHI

Photo Size
3 x 3.5 cm

Mr./Ms._____

Father's Name: _____

Department: _____ Class _____

CNIC No. | | | | | | - | | | | | | | - | |

_____
Official Seal &Signature

Date:_____

Please Note: No candidate will be allowed to take the entrance test without admit card and CNIC.

Postgraduate Admission 2019