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Application form for Winter Session 2021

Section A: your Personal Details

First Name: _____ Last Name: _____

Gender: Male Female

Section B: Contact Information

Corresponding Address: _____

City _____ Province _____

Telephone _____ Mobile _____

Email Address _____ Alternative Email Address _____

Section C: Details of Current and previous Education

Title of Qualification	Start Date	Completion Date	Grade	Institution

(If not completed, please indicate date on which final result will be available)

Section D: Supporting Documents

Following Supporting Material is required with all Applications

1. Attested copies of award certificates/qualifications
2. Attested copies of experiences certificates
3. Original bank draft/transfer receipt of Rs.1000/- Registration fee Non Refundable, payable to postgraduate Clinical studies KMC/KTH **Account number PK 44 NBP A 0388004136811535.**
4. Two color passport size photographs.
5. A current Resume/CV
6. Personal statement (briefly describing why you wish to attend this course and how is it going to benefit your current work).

Section E: Referees

Provide names and contacts of 2 referees

1. Referee Name

Institutional/Professional postal and email address of referee.

2. Referee Name

Institutional/Professional postal and email address of referee.

DECLARATION

I confirm that the information I have provided on this application form is to (to the best of my knowledge) true, accurate, current and complete; and I agree to notify the course organizers promptly if any information contained on this application form should change.

Signature _____ Full Name: _____ Date: ____/____/____2021

FOR OFFICE USE ONLY

Application Receive Date: _____

Accepted

Rejected

Reason for rejecting application _____