**ADMISSION 1ST YEAR MBBS SESSION (2025-26)**
**SARGODHA MEDICAL COLLEGE**

**You have to submit the following documents in original with plastic coating in college office before paying the college fee.**

1. Matriculation Certificate or Detailed Mark Sheets verified by respective Boards / O level students IBCC Equivalence Certificate.
2. F.Sc Certificate or Detailed Mark Sheets verified by respective Boards / A level students IBCC Equivalence Certificate.
3. Board Migration Certificate/NOC from other than Punjab board.
4. Character/Provisional Certificate of College, institute last attended.
5. Domicile Certificate
6. Valid Stay Card / Residence Permit Card / Green Card/ Sojourn/ Resident Card/Iqama or similar document of the candidate issued by country of residence along with valid Pakistani Passport OR valid Foreign Passport of the candidate *(For candidates applying on Overseas Pakistanis Seats)*;
7. MDCAT / SAT-II Result Card (2023/2024/2025).
8. Copy of CNIC/Form-B (Computerized) /Passport of candidate
9. Copy of CNIC of Parents (Father & Mother) /Guardian.
10. Disability Certificate issued by NCRDP/ District Social Welfare ( If applicable)
11. You may be medically examined by a board of doctors as a part of your admission process. The candidate must submit the following certificates :-
    a. Inoculated against the enteric group of fevers within the preceding 12 months.
    b. Fully vaccinated against Tetanus.
    c. Fully Vaccinated against hepatitis B virus.
    d. Foreign students will have to produce a certificate of their HIV status from prescribed laboratories in Pakistan. If during the course of studies any student is found to be positive for HIV infection, he/she shall be repatriated at his/her own cost to his/her country of origin.
12. 04 recent colored Photographs with blue background (Passport size)
13. Surety Bond worth Rs. 3 Millions, on stamp paper of PKR.100 /-**(Specimen is attached**).
14. Affidavit on stamp paper of PKR. 100/- (**Specimen is attached**).
15. Affidavit on stamp paper of PKR. 100/- in case of cancellation of admission by student already enrolled in a medical college. (**Specimen is attached**)
16. A plastic File Cover.
17. You are also directed to provide (attested three Photo copies) of each document mentioned above at the time of admission. Specimen signatures and left thumb impression (LTI) of the candidate in blue/black ink on a white paper
18. Total College Fee is PKR. 42030/-. Remaining fee challan form of college fee will be issued at the college after deduction of admission fee deposited by the student to UHS, Lahore. The challan form for the students willing to avail the hostel facility will be issued at the time of hostel allotment by the hostel administration. Total fee of hostel is Rs. 49700/-.
19. UHS registration fee & PMDC registration fee will be submitted by the admitted student later on at the time of registration.
20. The payment will be paid in advance by the student, availing hostel facility in case he/she is willing to use any additional facility like refrigerator, air conditioner or any other appliance. The payment will be paid in hostel by the concerned hostelite student.
21. **The parents(s) or legal guardians should accompany all the candidates at the time of joining.**

**Note**: You are advised to keep sufficient number of photo copies of all your academic documents because the original documents along with photocopies submitted by the student at the time of admission will be retained in the college office and will be handed over after the completion of MBBS programe.

# SARGODHA MEDICAL COLELGE

Student Bio Data Form For MBBS Session 2025-30

1'' x 1''

Fresh/Already Enrolled_____Name of Previous College _____

Name:_____CNIC_____

Father's Name:_____CNIC_____

Religion:_____Blood Group:_____

Gender:-_____ Date of Birth: _____Place of Birth (City)_____

District of Domicile _____Date of Admission_____

Admission Fee submitted in Bank of Punjab PKR _____UHS Challan ID_____

Date_____Fee Deposited in UBL SMC PKR ._____Date _____

**Matric / O level** Total Marks:-_____Obtained Marks _____Roll No:_____

Year of Passing:_____Registration No:_____ Board:_____

**F.Sc / A level** Total Marks:_____ Obtained Marks _____Roll No:_____

Year of Passing:_____Registration No: _____Board:_____

**MDCAT/NTS/NEB/SAT-II Score Roll No**:_____Total Marks:_____

Obtained Marks._____ Passing Year_____UHS Aggregate _____

Open Merit/Overseas/Reserved_____

**Postal Address:**_____

_____

**Permanent Address:**_____

_____

Address in Sargodha (during study):_____

_____

Father's Occupation: _____Father's Annual Income_____

Student's E-mail: _____Parent's Email:_____

Student's Contact No. _____Father's /Guardian Contact No._____

Student's WhatsApp No._____ Father's/Guardian WhatsApp No._____

Home Contact No: _____In Case of Emergency Contact No:_____

**For Overseas /PTAP students:-**

Nationality _____Passport No. _____Visa No. _____

Visa Issue Date_____Visa Expiry Date _____

Address in Foreign Country_____

_____

Reference Name: _____Contact No:_____

Reference Home Address:_____

**I HEREBY CERTIFY THAT ENTIRES ON THIS FORM ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.**

Student's Signature _____ Date:_____

## Sargodha Medical College
**Session 2025-26**

| **Name:** | |
|---|---|
| **Father's Name:** | |
| **Admission:- MBBS** | |
| Description | Yes/No |
| Original UHS Fee Paid Challan | |
| SMC Fee Paid Fee Challan | |
| Student Biodata Form | |
| Original Matric / O-Level (Certificate/ Mark Sheet) | |
| Verified Matric / O-Level (Certificate/ Mark Sheet) | . |
| Original F.Sc / A-Level (Certificate / Mark Sheet) | |
| Verified F.Sc / A-Level (Certificate / Mark Sheet) | |
| MDCAT Test Result / SAT-II | |
| NOC (for FSc other than Punjab province students) Mandatory | |
| Domicile | |
| Character Certificate | |
| Candidate CNIC / B-Form (copy) | |
| Copy of Parents CNIC | |
| Serological Status of HBs/ Vaccination Report | |
| Medical Certificate | |
| 04 Recent Photographs (blue background) | |
| Affidavit | |
| Surety Bond | |
| Passport (for Foreigner / Overseas only) | |
| **Resident/Citizenship Certificate** (for Foreigner / Overseas only) | |
| 03 Sets of all documents (readable photocopies) | |
| Affidavit of Cancellation from Previous Medical College (if any) | |

**Candidate's Signature:** _____

**Checked By:** _____


## Sargodha Medical College
**Session 2025-26**

| **Name:** | |
|---|---|
| **Father's Name:** | |
| **Admission:- MBBS** | |
| Description | Yes/No |
| Original UHS Fee Paid Challan | |
| SMC Fee Paid Fee Challan | |
| Student Biodata Form | |
| Original Matric / O-Level (Certificate/ Mark Sheet) | |
| Verified Matric / O-Level (Certificate/ Mark Sheet) | . |
| Original F.Sc / A-Level (Certificate / Mark Sheet) | |
| Verified F.Sc / A-Level (Certificate / Mark Sheet) | |
| MDCAT Test Result / SAT-II | |
| NOC (for FSc other than Punjab province students) Mandatory | |
| Domicile | |
| Character Certificate | |
| Candidate CNIC / B-Form (copy) | |
| Copy of Parents CNIC | |
| Serological Status of HBs/ Vaccination Report | |
| Medical Certificate | |
| 04 Recent Photographs (blue background) | |
| Affidavit | |
| Surety Bond | |
| Passport (for Foreigner / Overseas only) | |
| **Resident/Citizenship Certificate** (for Foreigner / Overseas only) | |
| 03 Sets of all documents (readable photocopies) | |
| Affidavit of Cancellation from Previous Medical College (if any) | |

**Candidate's Signature:** _____

**Checked By:** _____

# SURETY BOND

*(as per prospectus of UHS 2025-26 P# 55-56)*

I,_____(Surety) S/O, D/O_____

F/O _____(Student) R/O_____

_____CNIC #_____

Stand Surely for Mr. _____(Student / Candidate):

1. That I Solemnly declare that I shall serve Government of the Punjab as a "Probationary Medical Officer / Woman Medical Officer" in the primary healthcare facilities for a period of one year after completing the foundation year/house job. In case, I fail to fulfil the commitment, I shall be liable to pay Rs. 03 Million to the Government". (Health Department Notification No.S.O.(ME)9-4/2015 dated 24th August, 2015.
2. I (Father/Surety) solemnly declare that the statement made above by my son/Daughter/Ward is true and in case of violation. I will be liable to pay Rs.03 Million to the Government to the Punjab.

_____ _____

Signature of the Father (Surety) Signature of the Student (Surety)

**Witness: (To be witnessed by two Gazetted officer with sign and stamp)**

**Witness – I**

Signature _____
Name_____
CNIC NO. _____
Official Stamp _____

**Witness – II**

Signature _____
Name_____
CNIC NO. _____
Official Stamp _____

## AFFIDAVIT

## SPECIMEN

(To be submitted on Rs. 100/- Stamp Paper)

1. I solemnly declare that I am taking admission on Regular / Overseas / Others with my own will. I solemnly declare that I will pay all dues regularly during my studies at SMC.
2. All the particulars mentioned in my application for admission and documents submitted are true and correct and I fully understand that if any of the statements made in the application is found to be incorrect, my admission in Sargodha Medical College, Sargodha may not be made or if already admitted, would be liable to be cancelled at any time during the course of my studies as per rules of University of Health Sciences, Lahore.
3. I also solemnly declare that, if admitted, I will abide by the discipline, rules, and regulations of the College as enforced at present and made from time to time. I will concern myself only with the academic activities and such extracurricular activities, which are allowed by the College for the Healthy Growth of body and mind. I undertake that I will not take part in any political activity or agitation and I will not involve myself in indiscipline. The decision of the competent authority will be final and binding on me and it will not be challenged in any court of law.
4. I undertake that so long as I am a student of the College, I will do nothing either inside or outside the College and its premises that may interfere in its orderly administration and discipline or may bring the College or its administration into disrepute.
5. I fully understand that if I fail to clear the professional exams conducted by University of Health Sciences, Lahore in fixed attempts, I shall cease to be eligible for further Education as per rules of University of Health Sciences, Lahore.

If I violate the above affidavit I shall be liable to appropriate punishment(s) as prescribed in the prospectus /admission regulations of the University of Health Sciences, Lahore.

**Candidate**

Signature _____

Name. _____

CNIC No._____

Date _____

**Father/Guardian**

Signature _____

Name. _____

CNIC No. _____

Date _____

**Witness: (TO be witnessed by two Gazetted officers with sign and stamp)**

**Witness No. 1**

Signature_____

Name. _____

CNIC No. _____

Date. _____

**Witness No. 2**

Signature _____

Name. _____

CNIC No. _____

Date _____

**Signature with official stamp**

Judicial Magistrate/Civil Judge/Notary Public

# AFFIDAVIT

## SPECIMEN

*(To be submitted in the college where the candidate is admitted in minimum Rs. 100/- stamp paper by a candidate previously admitted in any medical/dental institute of the country)*

1. Mr/Ms. _____S/D/O _____ CNIC#_____ solemnly declare that I am admitted in _____ year class of MBBS/BDS in (Name of the college) _____City_____ Session 2025-26. However, I am desirous of getting admission in a Government Medical/Dental Institution of the Punjab on merit.

I solemnly pledge that if offered admission to first year class of a Government Medical/Dental Institution of the Punjab for the session 2025-26, I will forgo my previous admission, any credit of examinations passed and previously paid dues.

I also declare that I have not been expelled/debarred for admission under any prevision of the prospectus.

Signature of the candidate _____

Name of the candidate. _____

Signature of the father/guardian._____

Name of the father/guardian _____

**Verification by Principal of the College**

Signature_____

Name. _____

Official Stamp. _____

Date. _____

# APPLICATION FOR HOSTEL ALLOTMENT.

Photograph

Mr. /Miss. ----------

College Roll No. ---------- Class: ----------Session: ----------

Date: ---------- Signature of Student: ----------

Father's name: ----------Father's Occupation: ----------

Permanent Address: ----------

City: ---------- District: ----------

Current/Temporary Address: ----------

City: ---------- District: ----------

Student Contact No ----------Father/Guardian Contact No ----------

Home PTCL No ---------- Office Contact No ---------- Blood Group:----------

Specify any Disease for which you are currently Taking any medication:----------

---

**Please provide contact details of 3 persons to be contacted in case of any emergency.**

1. Name: ---------- Mobile/Contact#:----------
2. Name: ---------- Mobile/Contact#:----------
3. Name: ---------- Mobile/Contact#:----------

Signature of the Student: ---------- Signature of Father/Guardian: ----------

**Please attach of the following documents with the hostel allotment form:**

1. Paid College Fee Challan (Copy)
2. Paid Hostel Fee Challan (Original)
3. Copies of CNIC of Student, Father's and Visitors
4. Affidavit (Original).

Submit all the documents in file cover

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**FOR OFFICE USE.**

Room Allotted 1st Year/2nd /3rd /4th /5th

Hostel Clerk: ----------

Assistant Warden/Warden: ----------

# Visitor's Card for Hostel

1. Visitor's Name:----------

   Address----------

   ----------

   Relation with student----------

   Contact No ----------

   **Photograph**

2. Visitor's Name:----------

   Address----------

   ----------

   Relation with student----------

   Contact No ----------

   **Photograph**

3. Visitor's Name:----------

   Address----------

   ----------

   Relation with student----------

   Contact No ----------

   **Photograph**

4. Visitor's Name:----------

   Address----------

   ----------

   Relation with student----------

   Contact No ----------

   **Photograph**

# بیان حلفی

میں مسمی .....ولد.....

قومی شناختی کارڈ نمبر..... سکنہ..... کا

مستقل رہائشی ہوں اور حلفا بیان کرتا ہوں کہ

1 یہ کہ میری بیٹی مسماۃ ..... کا داخلہ سرگودہا میڈیکل کالج میں ہوا ہے

2 یہ کہ میری بیٹی غیر شادی شدہ ہے اور اس کی کسی سیاسی/غیر سیاسی تنظیم سے کوئی تعلق واسطہ نہ ہے اور نہ ہی مستقبل میں کسی تنظیم سے کوئی رابطہ رکھے گی۔ کسی قسم کی ہڑتال وتوڑ پھوڑ میں ملوث ہوگی اور نہ ہی کسی اور کو ترغیب دے گی۔

3 یہ کہ میری بیٹی کالج وہاسٹل کے تمام اصولوں کی پابندی کرے گی جو وقت کے ساتھ ساتھ تبدیل بھی ہوتے رہتے ہیں

4 یہ کہ میری بیٹی دوران تعلیم کسی سے لڑائی جھگڑا نہیں کرے گی۔

5 یہ کہ کالج ہذا و ہاسٹل انچارج کی جانب سے لگائے گئے جرمانہ کو وقت پر ادا کرے گی اور اسے قبول کرنے کی پابند ہوگی۔

6 یہ کہ کالج ہذا و ہاسٹل کی کمیٹی وسربراہ کا ہر فیصلے کو حتمی سمجھتے ہوئے اس کی پاسداری کرے گی اور اسے قبال کرنے کی پابند ہوگی۔

7 یہ کہ میری بیٹی کسی غیر متعلقہ شخص کو ہاسٹل میں نہ لائے گی اور نہ ہی دی گئی لسٹ کے علاوہ کسی سے ملاقات کرے گی۔

8 یہ کہ میری بیٹی کسی قسم کی نشہ آور ادویات استعمال نہ کرتی ہے اور نہ کسی قسم کا نشہ کرتی ہے علاوہ ازیں غیر ضروری دوائی ڈاکٹر کے نسخہ کے بغیر نہیں استعمال کرے گی۔ کسی غیر ضروری دوا کے استعمال سے اگر کسی کو کوئی مسئلہ (Reaction) ہوتا ہے تو اس کی تمام تر ذمہ داری میری بیٹی پر عائد ہوگی اور اس مسئلہ کا ادراہ ذمہ دار نہ ہوگا بلکہ ادارہ میری بیٹی پر ہر قسم قانون ومحکمانہ کاروائی کرسکتا ہے۔

9 یہ کہ میں لسٹ میں موجود اشخاص ہر بار میری بیٹی کو لینے نہیں آسکتے اس لئے میں اجازت دیتا ہوں کہ میری بیٹی اکیلی ہاسٹل سے گھر آجاسکتی ہے دوران سفر کسی قسم کے ناگہانی واقعے کی تمام تر ذمہ میری ہوگی ادارہ اس میں قصوروار نہ ہوگا۔

10 یہ کہ میرے علم ویقین کے مطابق تمام بیان درست وصحیح تسلیم ہیں اور اس میں کسی قسم کا کوئی امر پوشیدہ نہ رکھا گیا ہے تمام تحریر کو ہوش وحواس بغور پڑھ کر دستخط کردیئے ہیں

| العبد (حلف) | العبد (حلفہ) |
| --- | --- |
| دستخط..... | دستخط..... |
| نام..... | نام..... |
| شناختی کارڈ نمبر..... | شناختی کارڈ نمبر..... |