UNIVERSITY OF VETERINARY AND ANIMAL SCIENCES, LAHORE APPLICATION FORM FOR ADMISSION TO POST-GRADUATE STUDIES

(M.Phil / Ph.D)

Note: Please read instructions carefully before filling the Form.								Evening	Morn	III I	
1. Degree to which admission is sought M. Phil Ph.D.											
2.	Discipline to which admission is sought					_	Photograph				
3.	Status desired:										
	(a) Regular Student			(b) Unive	rsity Employ	vees:					
		(1)	Full-tin	ne (on-lea	ve) [[I]	Part-time					
(c)	Govt. Employee (on	leave)]	(d) Emplo	oyee of other S	Statutory Orga	L anizations on	leave			
4.	Name:Father's Name:										
5.	National Identity Ca	ard No			_Domicile:						
6.	Registered Number:	:			_Date of Birt	h:	Natio	onality:_			
7.	Present address for	corresponde	nce with	Telephon	e/ Cell No. &	& E-mail Ad	d:				
8.	Present Home Address:										
9.	Academic Record										
D	Degree/Certificate	University	Roll#	Year of	Annual/		Division	n	Sul	Subjects	
				Passing	Supple- mentary	Obtained Total or CGPA	OR Grad		Iajor	Minor	
M	Iatriculation										
F.	.Sc. (Pre-Med.)										
F.	.Sc. (Pre-Med.)										
D.	.V.M., B.Sc (Hons.)										
D A B	.V.M., B.Sc (Hons.) H, MBBS, BDS, .Pharm/ Pharm D,										
D. A. B. M. ar	.V.M., B.Sc (Hons.) H, MBBS, BDS, .Pharm/ Pharm D, I. Sc. Life-Sciences Or ny other equivalent										
D. A. B. M ar De	.V.M., B.Sc (Hons.) H, MBBS, BDS, .Pharm/ Pharm D, I. Sc. Life-Sciences Or										
D. A. B. M. arr D. M.	.V.M., B.Sc (Hons.) H, MBBS, BDS, .Pharm/ Pharm D, I. Sc. Life-Sciences Or ny other equivalent egree.										
D. A. B. M. arr D. M.	.V.M., B.Sc (Hons.) H, MBBS, BDS, .Pharm/ Pharm D, I. Sc. Life-Sciences Or ny other equivalent egree. I.Sc. (Hons.)/										
D. A. B. M arr D. M M	.V.M., B.Sc (Hons.) H, MBBS, BDS, .Pharm/ Pharm D, I. Sc. Life-Sciences Or ny other equivalent egree. I.Sc. (Hons.)/			Deide		France		Power			
DAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	.V.M., B.Sc (Hons.) H, MBBS, BDS, .Pharm/ Pharm D, I. Sc. Life-Sciences Or ny other equivalent egree. I.Sc. (Hons.)/ I.Phil	n Employe	r D	Brief Description		From nonth/year	To month/year	Permit	ited by 6	employer	
DAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	.V.M., B.Sc (Hons.) H, MBBS, BDS, .Pharm/ Pharm D, I. Sc. Life-Sciences Or ny other equivalent egree. I.Sc. (Hons.)/ I.Phil	n Employe	r D					Permit	_		
DAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	.V.M., B.Sc (Hons.) H, MBBS, BDS, .Pharm/ Pharm D, I. Sc. Life-Sciences Or ny other equivalent egree. I.Sc. (Hons.)/ I.Phil	n Employe	r D					Permit	_		

I solemnly declare that:

- 1. The particulars given in this form are correct to the best of my knowledge and belief and I have not concealed anything.
- 2. I have not taken admission in any Postgraduate course previously.
- 3. I have been never convicted by a court of law nor has a case ever been registered against me.
- I shall not indulge in any activity, which is subversive or prejudicial to the interest of the University, 4. throughout the period of my study, and shall abide by the rules of the University, framed from time to time.
- 5. If anything is found contrary to above against me, the University shall have the right to cancel my admission.
- 6. I will pay the capitation fee, if due.

g.

h.

i.

Dated	Signature of Applicant	Signature of Applicant				
INSTR	RUCTIONS					
Attested	copies of the following documents from a Gazetted Officer must accompany the application:					
a.	Matriculation Certificate.					
b.	Intermediate Certificate.					
c.	Detailed marks certificate/ Transcripts of D.V.M., B.Sc (Hons.) AH, MBBS, BDS, B.Pharm/ Pharm D, M. Sc. Life-Sciences Or any other equivalent Degree/ M. Phil, M. Sc (Hons.).					
d.	Migration Certificate in case of those applicants who are graduates of Universities other than the University of Veterinary and Animal Sciences, Lahore					
e.	Character Certificate duly signed by the Head of the Institution last attended on the prescribed Form.					
f.	Nomination/Permission from the Head of the Institution/Organization/Government Department (for employees only).					

Separate application Form is required for each discipline. j.

Two copies of passport size of recent photograph.

Copy of National Identity Card.

Copy of Domicile Certificate.

- Column # 10 must be filled by each candidate giving facts of the employment.
- k. Concealment of facts and / or false statement will lead to cancellation of admission at
- any stage. Incomplete application forms and those received after due date shall not be 1.
- entertained. At the time of 1st enrollment a certificate from the University Resident Medical Officer
- to the effect that he is free from any communicable disease or mental or physical m. disability which is likely to stand in the way of his pursuing the chosen field of study.