**OFFICE OF THE DEAN**

**BANNU MEDICAL COLLEGE, MTI BANNU**

PASTE PICTURE HERE

 **APPLICATION FORM FOR CONVOCATION 2023**

Name of the Applicant: ­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­\_\_\_\_\_\_

 (In Block letters)

Father/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
E-Mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone No. Resident: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ACADEMIC RECORD (MBBS):**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Qualification**  | **Passing Year**  | **A/S** | **Roll No** | **Marks Obtained** | **Total Marks** | **Attempts**  |
| **1st Year** |  |  |  |  |  |  |
| **2nd Year** |  |  |  |  |  |  |
| **3rd Year** |  |  |  |  |  |  |
| **4th Year** |  |  |  |  |  |  |
| **Final Year** |  |  |  |  |  |  |

Accommodation Required: YES /NO

No. of Guests: ­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Bank Detail for Registration fee:**

Bank Name: Bank of Khyber, IBB Branch KGNTH MTI Bannu

Bank Code: 5205

Account No. 3003967912

Title: Principal, BMC Bannu

**Note:** Candidates can submit registration fee on Online Cash or cheque

**Contact No. (for any queries)**

Mr. Manzoor Ahmad: 0334-9049440

Mr. Siffat Ullah: 0344-4025737