



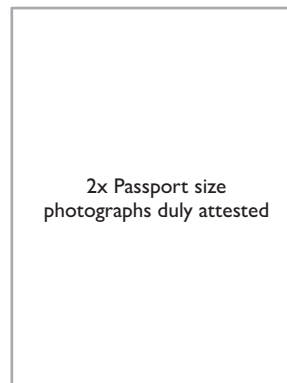
SCHOOL OF ALLIED HEALTH SCIENCES

Admission Office: 4/A-3, Phase 5, Hayatabad, Peshawar, Pakistan.
 Tel: +92-91-5825951-4, E-mail: sahs@rmi.com.pk

Application Form

For Admission in: F.Sc Medical Imaging Technology (M.I.T)
 F.Sc Operation Theatre Technology (M.T.T)
 F.Sc Physiotherapy Technology (Physio.T)
 F.Sc Medcial Laboratory Technology (M.L.T)

Please (✓) appropriate box



For Office Use

Application Number

Personal Data (Fill in Capital Letters Using Black Ball Point)

Applicant's Name

Date of Birth -- dd-mm-yy Age years Gender: M F

Marital Status: Married Unmarried

Present Address

District Country

Phone: Res Cell: E-mail:

Permanent Address

District Country

Candidate 's Nationality

Candidate 's CNIC/Form B No.

Father's Name Alive Deceased

Father's Profession [Exact designation]

Father's Address

District Country

Phone: Office: Cell: E-mail:

Name of Guardian [If other than Father]

Occupation of Guardian

Annual Income Father/Guardian in Pak Rupees

Address of Guardian

District Country

E-mail: Cell:

Phone: Off: Res:

Educational Qualifications

(Please attach attested photocopies of the supporting documents)

Year	Degree/Diploma/ Certificate	Institution Attended	Board/University	Marks Obtained	Total Marks
	SSC (Science) or equivalent				

Honours/Medals/Positions/Scholarships

Year	Achievement	Institution /Occasion

Languages

Please indicate the language and your reading, writing and speaking skill level

(Rate as Excellent / Good / Fair)

Languages	Read	Write	Speak

Co-curricular Activities

Application Procedure

- Admission form is available at Admissions Office, RMI-SAHS, 4/A-3, Phase-5, Hayatabad, Peshawar, Pakistan.
- Forms can be fill online & printed copies to be sent to;
Admissions Office, RMI-SAHS, 4/A-3, Phase-5, Hayatabad, Peshawar, Pakistan.

Checklist of Documents (attested photocopies) to be attached with Application Form

- Secondary School certificate (Matric) along with detailed marks certificate from Board of Intermediate and Secondary Education/equivalence certificate.
- CNIC / Form B of applicant and father/guardian.
- Domicile certificate.
- 2x recent original passport size photographs.

Signature of Applicant_____
Name_____
Father's Name