



**Dow University of Health Sciences Karachi**  
**Examinations Department**

Ref No.: DUHS/EXM/2017-1866

**NOTIFICATION**

It is notified for information to the concerned candidates of constituent institute of Dow University of Health Sciences, that the Examination Form & Fee of **Fourth Year MD Annual Examination 2017 (BATCH- 1)** will be accepted as following up to: **05<sup>th</sup> January, 2018** in the office of the respective college.

<i>MD – Cardiology(Batch – 1)</i>	
<i>MD – Radiology (Batch – 1)</i>	
<i>MD – Family Medicine (Batch – 1)</i>	

**EXAMINATION FEE Rs: 8,000/-**

**IMPORTANT INSTRUCTIONS**

The respective college will receive the forms, paid fee voucher & required documents from the eligible candidates and will submit to the Examinations Department, Dow University of Health Sciences within **three days** with a list of candidates completing the required formalities. The Payment Voucher of Examination Fee of each candidate may be enclosed with the examination form of the respective candidate. The following documents are required to be attached:

1. Photocopy of relevant transcript of 3<sup>rd</sup> Year.
2. Photocopy of the Enrolment Card.
3. Photocopy of the College Identity Card.
4. Original Fee Paid Voucher.
5. **Any Other relevant document/ information can be asked to submit in addition to above.**

**Dated: 21-12-2017**

C.c to:

1. The Staff Officer to the Vice-Chancellor, DUHS.
2. The P.A to Pro-Vice-Chancellor, DUHS.
3. The P.A to Registrar, DUHS.
4. The Advisor to Vice-Chancellor, DUHS.
5. The Director Finance, DUHS.
6. The Program Director, All Concerned, DUHS.
7. The Chairman, Department of P.G Studies, DUHS.
8. The Director, CMS, DUHS.
9. The Web Manager, DUHS.
10. All Concerned.

  
**Controller of Examinations**