



# Dow University of Health Sciences Karachi

## Examinations Department

Ref No.: DUHS/EXM/2025-451

### **NOTIFICATION**

It is notified for information to the concerned candidates that the **Enrollment and First Year Examination Form & Fee** will be accepted as following up to: **28<sup>th</sup> Feb, 2025** in the office of the respective college / institute.

Course	Enrolment Fee	Examination Fee	Year
<u><b>(DIPLOMA PROGRAMS)</b></u>	<b>As Per Fee Structure</b>		<b>2025</b>

PROGRAMS	BATCHES
<i>Diploma in Family Medicine (DFM)</i>	<i>(Batch- - 13)</i>
<i>Diploma in Tuberculosis &amp; Chest Diseases (DTCD)</i>	<i>(Batch- - 13)</i>
<i>Diploma in Psychiatric (DP)</i>	<i>(Batch- - 13)</i>
<i>Diploma in Medical Radiology (DMRD)</i>	<i>(Batch- - 13)</i>
<i>Diploma in Dermatology (D.DERM) DUHS</i>	<i>(Batch- - 13)</i>
<i>Diploma in Cardiology (NICVD) (DIP CARD)</i>	<i>(Batch- - 13)</i>
<i>Diploma in Child Health (DCH)</i>	<i>(Batch- - 13)</i>
<i>Diploma in Critical Care Medicine (DCCM)</i>	<i>(Batch- - 13)</i>

### **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 **Enrolment & Examination Fee** of each candidate may be enclosed with the forms of the respective candidates. The following documents are required to be attached:

1. *Original Paid Fee Voucher.*
2. *Photocopy of the Admission Letter/ Placement Letter.*
3. *Photocopy of the College Identity Card.*
4. *Photocopy of Graduate Degree.*
5. *Photocopy of valid Registration from PM&DC.*
6. *Attested Photocopy of Matriculation Certificate.*
7. *Attested Photocopy of C.N.I.C.*
8. *Migration Certificate (Those graduated other than DUHS).*
9. *Three Recent Photographs (Attested from the back).*
10. *Paid tuition fee voucher copy must be attached.*
11. *Any other information/ document can be asked to submit in additional to the above*

**Dated: 17-02-2025**

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 Director, Finance, DUHS.
5. The Project Director, Dow University of Health Sciences.
6. The Principal, School of Postgraduate Studies, DUHS.
7. The Program Director, DTCD, DFM, DP, DMRD, DCH, DIP.CARD, D-DERM, DCCM, Ojha Campus.
8. The Director, CMS, DUHS.
9. All Concerned.

*Controller of Examinations*