



# Dow University of Health Sciences Karachi

## Examinations Department

Ref No.: DUHS/EXM/2025-387-A

### **NOTIFICATION**

It is notified for information to the concerned candidates of the following course at Constituent Institute of Dow University of Health Sciences, that the Enrolment and Examination Form & Fee of **Masters in Health Professions Education (MHPE) Semester-I Examination 2025 (BATCH - 11)** will be accepted as following up to: **22<sup>nd</sup> February, 2025** in the office of the respective college / institute.

| Course  | Enrolment Fee               | Examination Fee |
|---|-----------------------------|-----------------|
| <b><u>POST GRADUATE</u></b><br><b><u>(MHPE)</u></b><br><b><u>(BATCH - 11)</u></b> | <b>As Per Fee Structure</b> |                 |

### **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. *Photocopy of Admission Letter.*
2. *Photocopy of Matriculation Certificate (Attested).*
3. *Photocopy of Intermediate Certificate (Attested).*
4. *Migration Certificate (Original)*
5. *Photocopy of the College Identity Card.*
6. *Photocopy of Graduate Degree.*
7. *Photocopy of CNIC.*
8. *Three Recent Photographs.*
9. *Paid Fee Voucher.*
10. **Any other information / document can be asked to submit in additional to the above.**

**Dated: 10-02-2025**

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 Project Director, Dow University of Health Sciences.
5. The Director Finance, DUHS.
6. The Principal, School of Postgraduate Studies, DUHS.
7. The Program Director, MHPE, Ojha Campus.
8. The Director, CMS, DUHS.
9. All Concerned.

***Controller of Examinations***