Dow University of Health Sciences Karachi

Examinations Department

Ref No.: DUHS/EXM/2021-448

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 **Master of Dental Surgery (MDS) Semester-I Examination 2021** (Clinical - Batch-10) **Master of Dental Science (MDS) Semester-I Examination 2021** (Basic – Batch-13) will be accepted as following up to: **24th March, 2021** in the office of the respective college / institute.

Course	Enrolment Fee	Examination Fee
POST GRADUATE (Session / Year - 2020)	**Rs: 2,000/-** *(Late Fee 20% i.e. Rs: 400 to be added after due date*)*	**Rs: 4,000/-** *(Late Fee 20% i.e. Rs: 800 to be added after due date*)*

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 the Admission Letter/ Placement Letter (Attested by Director/ Principal).*
2. *Attested Photocopy of Matriculation Certificate (Attested by Director/ Principal).*
3. *BDS or Equivalent recognized by PM&DC (Attested by Director/ Principal).*
4. *Photocopy of valid Registration from PM&DC (Attested by Director/ Principal).*
5. *Attested Photocopy of C.N.I.C.*
6. *One Year House Job (Attested by Director/ Principal).*
7. *GAT General Examination is to be passed in 1st Semester as part of Admission Criteria without passing GAT General, candidate cannot precede Thesis / Research Project for IRB – DUHS.*
8. *Three Recent Photographs.*
9. *Migration Certificate (Those graduated other than DUHS) (Attested by Director/ Principal).*
10. *Original Paid Fee Voucher.*
11. *Attested Photocopy Sindh Domicile.*
12. ***Any other information / document can be asked to submit in additional to the above.***

Dated: 09-03-2021

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 Director, MDS Program, DIEKIOHS, Ojha Campus.
8. The Director, CMS, DUHS.
9. The Web Manager, DUHS.
10. All Concerned.

Controller of Examinations