



INSTITUTE OF ALLIED HEALTH SCIENCES
D. G. KHAN MEDICAL COLLEGE
DERA GHAZI KHAN

Phone: 064-9260634, www.iahs.edu.pk www.dgkmc.edu.pk info@iahs.edu.pk

PROGRAMS FOR THE SPRING SEMESTER 2024-2025



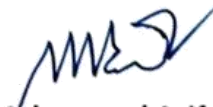
CLARIFICATION

In continuation of the advertisement which was published on 03.12.2024 in daily newspaper "Jang" vide IPL No. 10346 in which eligibility criteria was mentioned i.e. F. Sc. Pre-Medical or F. Sc. in relevant Technology from Board of Intermediate & Secondary Education/ equivalent qualification (as recognized by the Inter Board Committee of Chairmen, Islamabad (IBCC)), with at least 50% unadjusted marks.

In the light of the Notification issued by the University of Health Sciences Lahore (UHS) vide No. UHS/REG-24/453 dated 23.02.2024, allocation of quota up to 5% in Allied Health Sciences bachelor degree programs of UHS for PMF qualified candidates having IBCC equivalence of F.Sc. in Medical Technology which are given below

Sr. No.	PMF Course	AHS - UHS Course
1	Medical Lab. Technician	B.Sc (Hons.) Medical Laboratory Technology
2	Operation Theatre Technician	B.Sc (Hons.) Operation Theatre Technology
3	Radiography & Imaging Technician	B.Sc (Hons.) Medical Imaging Technology

Other Term & Conditions will remain same and last date for submission of applications will also remain 23rd December, 2024.


Prof. Dr. Muhammad Asif Qureshi
PRINCIPAL
D. G. KHAN MEDICAL COLLEGE
DERA GHAZI KHAN



INSTITUTE OF ALLIED HEALTH SCIENCES
D. G. KHAN MEDICAL COLLEGE DERA GHAZI KHAN
Phone: 064-9260634, www.jahs.edu.pk www.dgkmc.edu.pk info@jahs.edu.pk
PROGRAMS FOR THE SPRING SEMESTER 2024-2025



Sr. No.	Name of Technology	Duration	Eligibility Criteria to Apply
1	B. Sc. (Hons) Medical Imaging Technology (MIT)	4 Years (08 Semesters)	F. Sc. Pre-Medical or F. Sc. in relevant Technology from Board of Intermediate & Secondary Education/ equivalent qualification (as recognized by the Inter Board Committee of Chairmen, Islamabad (IBCC)), with at least 50% unadjusted marks.
2	B. Sc. (Hons) Medical Laboratory Technology (MLT)	4 Years (08 Semesters)	
3	B. Sc. (Hons) Operation Theatre Technology (OTT)	4 Years (08 Semesters)	

HOW TO APPLY? (INSTRUCTIONS TO FILL AND SUBMIT THE APPLICATION FORM)

1. Visit <https://www.dgkmc.edu.pk/> & <https://jahs.edu.pk/> to download the admission form and challan form.
2. Fill up the Challan Form and pay the fee at any branch of the Bank of Punjab. The application fee for each program is Rs. 1000 (Rs. 3000 total if you are applying in all 3 programs)
3. Fill up the admission form carefully.
4. Individually apply for each program. (If you are applying for all three programs then you download and fill the three Challan and Admission form)
5. Send the application form and relevant documents to the address "Director, Institute of Allied Health Sciences, D.G. Khan Medical College, Jampur Road, Dera Ghazi Khan, Pakistan."
6. The admission form and relevant documents received (by hand or by courier) after due date will not be accepted.
7. The last date for submission of the applications is Monday, December 23, 2024, till 03:00 pm.
8. Entrance test will be conducted on Saturday, January, 04, 2025, sharp at 10:00AM. (Roll No. Slip can be collect from Director IAHS office till 03-01-2025, 03:00 PM).
9. Final Selection list of all the programs will be displayed on Saturday, January, 11, 2025.
10. Regular classes will commence on Monday, March, 03, 2025.
11. Call 064-9260634, if you face any difficulty while filling out the form (Monday to Saturday, from 08:00 AM to 03:00 PM only).

DOCUMENTS TO BE ATTACHED WITH THE PRINTED APPLICATION FORM:

(Attested by a Gazetted Government Officer)

1. Paid Challan Form (Original)
2. Secondary School Certificate (SSC) verified by IBCC.
3. Higher Secondary School Certificate (HSSC Pre-Medical) verified by IBCC.
4. Domicile Certificate of Punjab. For the tribal seat, the candidate should have a Domicile Certificate of the tribal area of Dera Ghazi Khan, Punjab. Other certificates or documents (e.g., Birth Certificate, Form-B, or CNIC, etc.) are unacceptable in lieu of a Domicile Certificate. Any candidate found to have a domicile of more than one place shall be disqualified.
5. Character Certificate from the institution last attended.
6. CNIC of the candidate and the CNIC of the Father or Guardian.
7. If you are applying for the employee seat then attach the Family Registration Certificate (FRC) issued by NADRA and the regular employee certificate of the guardian/ spouse issued by the competent authority.
8. Four recent passport-size photographs with blue backgrounds. One photograph should be attested on the front and the other three should be attested on the back.
9. Original Fitness Certificate issued by a registered Medical Practitioner/ Government Medical Officer indicating the PMDC number of the attester.
10. Disability Certificate issued by "Provisional Council for The Rehabilitation of Disabled Persons" only for special person candidates.
11. Candidates having foreign qualifications must provide the attested copies of the Equivalence Certificate issued by the Inter Board Committee of Chairmen (IBCC).

NOTE:

1. There are sixty seats in total (20 seats for each degree program mentioned above)
2. 02 Seats (one in MIT and one in MLT) out of total 60 seats are reserved for special person candidates which will be allocated on a merit basis. The decision of the Admission Board shall be final.
3. 01 Seat (in OTT) out of total 60 seats is reserved for the Tribal Quota of Dera Ghazi Khan; the merit list of the Tribal Quota of Dera Ghazi Khan shall be finalized on the basis of merit. The decision of the Admission Board shall be final.
4. 03 Seats (one in MIT, one in MLT, and one in OTT) out of total 60 seats are reserved for children/ spouses of Regular employees working at D. G. Khan Medical College and Allama Iqbal Teaching Hospital, Dera Ghazi Khan. The allocation of seats will be purely on a merit basis. The decision of the Admission Board shall be final.
5. Selection will be made strictly on open merit basis.
6. The Course fee once paid by the candidates after securing the admissions will not be refunded at any stage.
7. There is no hostel facility for the institute of Allied Health Sciences students.
8. Contact at 064-9260634, 064-9260631 for admission related queries (Monday to Saturday, from 08:00 AM to 03:00 PM only).

IPL-10346

Prof. Dr. Muhammad Asif Qureshi Principal D.G. Khan Medical College Dera Ghazi Khan

INSTITUTE OF ALLIED HEALTH SCIENCES D.G. KHAN MEDICAL COLLEGE



Dera Ghazi Khan

Ph: 064 9260634 Email: iaahsdgkmc@gmail.com



Sr. No. _____

ADMISSION FORM

FOR ADMISSION IN INSTITUTE OF ALLIED HEALTH SCIENCES, 04 YEAR(08 SEMESTERS) DEGREE PROGRAM
FOR SESSION 2024-25

Open Seat Disable Seat Employee Seat Tribal Area Seat PMF Seat

Select the Degree Program.

B.Sc.(Hons) Medical Imaging Technology (MIT)

B.Sc.(Hons) Medical Laboratory Technology (MLT)

B.Sc.(Hons) Operation Theater Technology (OTT)

Name (in block letters): _____

Father's Name (in block letters): _____

Date of Birth: _____ Religion _____

Domicile: _____

Present Postal Address: _____

Permanent Home Address: _____

Tel: (R) _____ Mobile: _____ Fax/Email _____

Father's/Guardian's

a) Name (in block letters): _____

b) Relationship with the applicant (in case of guardian): _____

Tel: (R) _____ Mobile: _____ Fax/Email _____

Academic detail of the applicant:

Degree / Certificate	Board	Roll No.& Reg.No.	Year of Passing	Subjects	Marks Obtained
Matric					
Intermediate (Pre Medical) or Equivalent					

(For Candidate)

Signature _____

Name: (_____)

CNIC No: _____

(For Father/Guardian)

Signature _____

Name: (_____)

CNIC No: _____

For office use only

Application No	Marks Matric	Marks F.Sc.	Marks Entry Test	Hafiz Quran Marks	Cumulative % age
				03	

INSTITUTE OF ALLIED HEALTH SCIENCES

D. G. KHAN MEDICAL COLLEGE

DERA GHAZI KHAN



PH: 064-9260631; 064-9260634

Email: iaahsdgkmc@gmail.com



Dairy No. _____
(Office use Only)

Roll No. _____
(Office use Only)

ROLL NUMBER SLIP ENTRANCE TEST FOR ADMISSION INTO B.SC(HONS) (04 YEAR, 08 SEMESTERS) ALLIED HEALTH SCIENCES FOR SESSION 2024-25

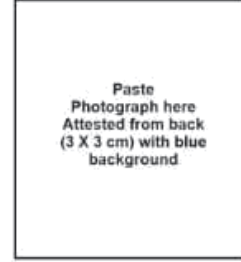
NAME: _____

FATHER'S NAME: _____

Signature of the Candidate

Note: Cell/mobile phones, palm tops, minicomputers and other electronic equipment likely to help the candidate are completely prohibited in the examination center.

Director
Institute of Allied Health Sciences
D. G. Khan Medical College
Dera Ghazi Khan



Paste
Photograph here
Attested from back
(3 X 3 cm) with blue
background

INSTITUTE OF ALLIED HEALTH SCIENCES

D. G. KHAN MEDICAL COLLEGE

DERA GHAZI KHAN



PH: 064-9260631; 064-9260634

Email: iaahsdgkmc@gmail.com



Dairy No. _____
(Office use Only)

Roll No. _____
(Office use Only)

ROLL NUMBER SLIP ENTRANCE TEST FOR ADMISSION INTO B.SC(HONS) (04 YEAR, 08 SEMESTERS) ALLIED HEALTH SCIENCES FOR SESSION 2024-25

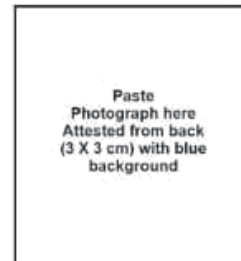
NAME: _____

FATHER'S NAME: _____

Signature of the Candidate

Note: Cell/mobile phones, palm tops, minicomputers and other electronic equipment likely to help the candidate are completely prohibited in the examination center.

Director
Institute of Allied Health Sciences
D. G. Khan Medical College
Dera Ghazi Khan



Paste
Photograph here
Attested from back
(3 X 3 cm) with blue
background



Student Copy



CHALLAN FOR REMITTANCE OF PROSPECTUS FOR B.Sc
(HONS.) SEMESTER BASE PROGRAM FOR THE YEAR 2024-25

**INSTITUTE OF ALLIED HEALTH SCIENCES
D.G. KHAN MEDICAL COLLEGE
DERA GHAZI KHAN**

Bank Of Punjab, Near College Chowk, D.G. Khan
Account # 6010002532500028
Branch Code # 0013

Details to be filled by the Applicant

Mr/Ms: _____

Father Name: _____

CNIC No: _____

CELL No: _____

Date of Remittance:: _____

Registration Fee for each Program is 1000/- PKR

Select the Program Rs.

MIT @ 1000/- PKR

MLT @ 1000/- PKR

OTT @ 1000/- PKR

Grand Total

In Words: _____

Signature
Authorized
Officer
(Bank)
Student Signature



College Copy



CHALLAN FOR REMITTANCE OF PROSPECTUS FOR B.Sc
(HONS.) SEMESTER BASE PROGRAM FOR THE YEAR 2024-25

**INSTITUTE OF ALLIED HEALTH SCIENCES
D.G. KHAN MEDICAL COLLEGE
DERA GHAZI KHAN**

Bank Of Punjab, Near College Chowk, D.G. Khan
Account # 6010002532500028
Branch Code # 0013

Details to be filled by the Applicant

Mr/Ms: _____

Father Name: _____

CNIC No: _____

CELL No: _____

Date of Remittance:: _____

Registration Fee for each Program is 1000/- PKR

Select the Program Rs.

MIT @ 1000/- PKR

MLT @ 1000/- PKR

OTT @ 1000/- PKR

Grand Total

In Words: _____

Signature
Authorized
Officer
(Bank)
Student Signature



Bank Copy



CHALLAN FOR REMITTANCE OF PROSPECTUS FOR B.Sc
(HONS.) SEMESTER BASE PROGRAM FOR THE YEAR 2024-25

**INSTITUTE OF ALLIED HEALTH SCIENCES
D.G. KHAN MEDICAL COLLEGE
DERA GHAZI KHAN**

Bank Of Punjab, Near College Chowk, D.G. Khan
Account # 6010002532500028
Branch Code # 0013

Details to be filled by the Applicant

Mr/Ms: _____

Father Name: _____

CNIC No: _____

CELL No: _____

Date of Remittance:: _____

Registration Fee for each Program is 1000/- PKR

Select the Program Rs.

MIT @ 1000/- PKR

MLT @ 1000/- PKR

OTT @ 1000/- PKR

Grand Total

In Words: _____

Signature
Authorized
Officer
(Bank)
Student Signature