

## Application Form for Admission in

Dental Surgery Assistant (DSA)

2x Passport size  
photographs duly attested

### For Office Use

Application Number

### Personal Data (Fill in Capital Letters Using Black Ball Point)

Applicant's Name

Date of Birth  -  -  dd-mm-yy Age  years Gender: M  F

Marital Status: Married  Unmarried

Present Address

District  Country

Phone: Res \_\_\_\_\_ Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

Permanent Address

District  Country

Candidate's Nationality

Candidate's CNIC No.  -  -

RMI Staff: Yes  No

Father's Name  Alive  Deceased

Name of Guardian [If other than Father]

Relationship with Guardian

Father's Profession [Exact designation]

Address

District  Country

Phone: Office: \_\_\_\_\_ Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

Occupation of Guardian

Annual Income Father/Guardian in Pak Rupees \_\_\_\_\_

### Professional Qualification

Honours/Medals/Positions/Scholarships

Course Name	Year	Grade	Institution	PNC Reg. No.

### Educational / Qualifications

(Please attach attested photocopies of the supporting documents)

Degree	Name & Location of School	Examination Board	Year of Passing	Division / Grad / GPA
Matriculation				

### Employment

Employment	Total Experience	Status	
		Part Time	Full Time
Name & Location of Organization _____ Designation _____ Dept. _____ Date of Employment: From _____ To _____			

### Co-curricular Activities

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### Application Procedure

- Admission form is available at Student affairs office Rehman College of Allied Health Sciences.
- Form duly filled with attached complete set of Documents to be sent to Student affairs office ,5th floor. Rehman College of Allied Health Sciences, Phase 5 ,Hayatabad Peshawar Pakistan.

### Checklist of Documents (attested photocopies) to be attached with Application Form

- Secondary school certificate (Matric) and intermediate certificate along with detailed Marks Certificates from Board of Intermediate and Secondary Education /Equivalence certificate form IBCC
- CNIC of Applicant and father /guardian.
- Copies of all experience certificates
- Domicile certificate
- 2x recent original passport size photographs
- NOC from Institute of Current employer

**Note: Fee = PRR 10,000/- Per Semester**

**Declaration: The information that is provided are correct without any doubt.**

Name \_\_\_\_\_

Applicant Sign. \_\_\_\_\_

Date \_\_\_\_\_