



# Dow University of Health Sciences Karachi.

## Examinations Department

Ref No.: DUHS/EXM/2024-1163

### **NOTIFICATION**

It is notified for information to the **Repeater/ Failure Candidates** of Institute of Business & Health Management, DUHS that the **Examination Form & Fee** will be accepted as following up to: **07<sup>th</sup> June, 2024** in the office of the respective college / institute.

Course	Course Duration	Semester (Session Spring – 2024)
MBA	2 yrs	Semester- I & II
EMBA	2 yrs	Semester- I

## **EXAMINATION FEE Rs: 10,000/-**

### **IMPORTANT INSTRUCTIONS**

The respective college / institute 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 Examination Fee of each candidate may be enclosed with the examination form of the respective candidate. The following documents are required to be attached:

1. *Photocopy of relevant transcripts of last appearing in MBA/EMBA Exam.*
2. *Photocopy of the Enrolment Card.*
3. *Original Fee Paid Voucher.*
4. ***Paid tuition fee voucher copy must be attached.***
5. ***Any other relevant document/ information can be asked to submit in addition to above.***

**Dated: 01-06-2024**

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 Post Graduate Studies, DUHS.
7. The Program Director, Institute of Business & Health Management, DUHS.
8. The Director, CMS, DUHS.
9. The Web Manager, DUHS.
10. All Concerned.

***Controller of Examinations***