

Dow University Hospital

PERFORMA FOR HOUSE JOB

Name: _____

D/o, S/o: _____

Gender: _____ Date of Birth: _____

Nationality: _____ Domicile: _____

NIC No: _____

Year of Graduation (MBBS): _____

College of Graduation: _____

University: _____

Awards: _____

Distinctions: _____

GPA final year: _____

Previous house job if any: _____

Address: _____

Landline: _____ Mob: _____

E-mail: _____

Dow University Hospital

Documents to be attached:

- 1) 1 CNIC Copy ☐
- 2) BLS Certificate ☐
- 3) 1 Passport size picture with blue or white background ☐
- 4) Photocopy of Provisional Certificate of DIMC or Degree ☐
- 5) Provisional Registration Certificate from PMDC or proof of submission of application
(Essential) or Provisional Registration Certificate. ☐
- 6) Signature; _____

Recommendations of house job committee: