



# Dow University of Health Sciences Karachi

## Examinations Department

Ref No.: DUHS/EXM/2026-193

## **NOTIFICATION**

It is notified for information to the concerned candidates of **Dow College of Pharmacy**, Ojha Campus that the **M.Phil. in Pharmacy Practice Form & Fee First Year Semester-I 2<sup>nd</sup> Retake Examination 2025 (Batch - 4)** will be accepted as following up to: **26<sup>th</sup> January, 2026** in the office of the respective college / institute.

## **EXAMINATION FEE: AS PER FEE STRUCTURE**

### **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 **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 transcript of last appearing Exam.*
2. *Photocopy of Enrolment Card.*
3. *Photocopy of Fee Paid Voucher.*
4. *Photocopy of the College Identity Card.*
5. *Paid tuition fee voucher copy must be attached.*
6. *Any other information/ document can be asked to submit in additional to the above.*

**Dated: 15-01-2026**

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 Postgraduate Studies, DUHS.
7. The Program Director, DCOP, Ojha Campus.
8. The Director, CMS, DUHS.
9. The Officer-Concerned, Web portal, DUHS.
10. All Concerned.

***Controller of Examinations***