



**Dow University of Health Sciences Karachi**  
**Examinations Department**

Ref No.: DUHS/EXM/2026-599

**NOTIFICATION**

It is notified for information to the concerned eligible/ failure candidates of School of Public Health, Ojha Campus that the Examination Form & Fee of **Second Year MPH Semester-III Retake Examination 2026 (Batch - 10)** will be accepted as following up to: **19<sup>th</sup> March, 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 examination form of the respective candidate. The following documents are required to be attached:

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

**Dated: 07-03-2026**

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 Public Health, Ojha Campus.
7. The Principal, School of Postgraduate Studies, DUHS.
8. The Program Director, MPH, Ojha Campus.
9. The Director, CMS, DUHS.
10. The Officer-Concerned, Web Portal, DUHS.
11. All Concerned.

***Controller of Examinations***