



**Shifa College of Dentistry
Shifa Tameer-e-Millat University
FCPS Part II Training Application Form
In Orthodontics, Prosthodontics & Operative and Endodontics**



Specialty (to apply)	Preference No 1:		
	Preference No 2:		
	Preference No 3:		
Date of Application		Application No (office use)	

Personal Details			
Full Name (as per CNIC)			
Father / Husband Name		Marital Status	
CNIC/ Passport No:			
Date of Birth (as per CNIC)		Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Address:			
Contact Number:		Email:	
Emergency Contact Name & Number:			
PMDC No		PMDC Registration Expiry	
BLS Certified	<input type="checkbox"/> Yes <input type="checkbox"/> No	ACLS Certified	<input type="checkbox"/> Yes <input type="checkbox"/> No

Academic Information				
Certificate or Degree	Board or University	Year of Passing	Marks	Percentage
Matriculation/O-Level/ Equivalent			Obtained: Total:	
Intermediate/A-Level/ Equivalent			Obtained: Total:	
BDS			Obtained: Total:	

House Job Institution Name:	Start Date:	End Date:
FCPS Part I Passing Date		

Professional Experience (starting from recent)		
Name of Institute	Position	Duration



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List of Mandatory Documents	
List of Documents	Received
CNIC/Passport Copy (01 copy)	
Photocopies of Matric & Intermediate certificates (01 copy each)	
BDS Degree & Transcript Copy (01 copy each)	
House Job Certificate (01 copy)	
PMDC/PMC Registration certificate (01 copy)	
Photocopy of FCPS Part I (Congratulations Letter for FCPS program)	
Copies of Basic Life Support (BLS), Advanced Cardiac Life Support (ACLS) certificates	
Curriculum Vitae (CV)	
Passport-Sized Photograph (04)	
Bank Draft Number:	

The above list of documents along with a hardcopy of this form shall be submitted to Human Resource Department, SCD. Incomplete applications will not be accepted.

Application Fee:

- Candidates are required to submit **an application fee of Rs. 5000/- along with this form.**
- The application fee can only be deposited through bank draft in **favor of Shifa Tameer-e-Millat University (NTN: 4036429-1).**
- The original bank draft is mandatory to be submitted along with the application form and above-mentioned mandatory documents.

Declaration of Intent:

I solemnly declare that the information provided by me on this application form is complete and accurate to the best of my knowledge. I understand that declaration of any false or misleading information will result in immediate cancellation of my admission and termination from the Institute.

Signature of the Candidate: _____

Date: _____

In case of any queries, please contact Human Resource Department, SCD

Contact Number: 051-8490259 & 051-8482085

Email: hr.scd@stmu.edu.pk