Faisalabad Medical Univ Faisalabad <u>University Copy</u>		bad Medical University Faisalabad <u>Applicant Copy</u>	Faisala	abad Medical University Faisalabad <u>Bank Copy</u>
Branch Code: Date:	Branch Code:	Date: E	Branch Code:	_ Date:
Branch Name:	Branch Name:	E	Branch Name:	
BS Programmes, Admission Fee 202	24-25 BS Programmes, A	dmission Fee 2024-25	BS Programmes, Admission Fee 2024-25	
HBLHABIB BANKA/C Title:Faisalabad Medical University FaA/C Number:14667992134603Branch:HBL PMC Branch FaisalabadNote:Desire Bank stamp is required on the deposit submit original deposit slip (University Copy) to University Office.	A/C Number:14667992Branch:HBL PMC Bitsit slip &Note:Desire Bank stamp is r	edical University Faisalabad 134603 Fanch Faisalabad equired on the deposit slip & University Copy) to University	A/C Number: 14667992 Branch: HBL PMC I	Branch Faisalabad required on the deposit slip &
Program Name:	Program Name:		Program Name:	
Applicant's Name:	Applicant's Name:		Applicant's Name:	
Father Name:	Father Name:		Father Name:	
CNIC No:	CNIC No:	(CNIC No:	
	Admission Fee:	1,000/-	Admission Fee:	1,000/-
Total payable Fee:1	,000/- Total payable Fee:	1,000/-	Fotal payable Fee:	1,000/-
Applicant Signature Cashier	Officer Applicant Signature	Cashier Officer	Applicant Signature	Cashier Officer