



## Punjab Medical Faculty

22-B, New Muslim Town, Near Ayub Market, Lahore

### Application for of Affiliation with Punjab Medical Faculty

#### Part I

#### General Information

Name of Institute:	
Address:	
Contact Details:	
Principal of the Institute:	
<ul style="list-style-type: none"> <li>i. Name</li> <li>ii. Qualification</li> <li>iii. Mobile No.</li> <li>iv. Email Address</li> </ul>	
Is the institute recognized by PMDC /CPSP:	
Yes	No

#### Categories applied for with number of seats:

Sr #	Technology	Seats
1.		
2.		
3.		
4.		

In case, the owner of the institute is not working as Principal:

Name of the owner: -----  
 Qualification: -----  
 Cell No. -----  
 Email: -----

## Part II – Physical Infrastructure

<b>Status of Building</b>		
Owned	Rented	Leased
<b>Building:</b>	<b>Area (Sq Feet)</b>	
Total Area:		
Covered area:		
<b>Class Rooms:                      Dimensions (length &amp; width)</b>		
# 1		
# 2		
# 3		
# 4		
<b>Laboratories:</b>		
Pharmacy (for Disp)		
Pathology (for MLT)		
<b>Demonstration Room:</b>		
1		
2		
<b>Library/ Reading Room:</b>		

## Part III – Financial Base

### *Details of Bank Account:*

Bank/ Branch	
Account Title	
Account No.	
Date of last external Audit	

### Part IV – Attached Hospital / Health Facility

(use separate sheet if more than one attached hospital/health facility)

Name of the Hospital:	
Address:	

Distance from the Institute:

Attached < 1 Km	More than 1km

Bed Strength:	
---------------	--

Ownership:

Owned by Institution	Has MoU

Status of the Hospital with Punjab Healthcare Commission:

Not Registered	Registered	Provisionally Licensed	Licensed

Mandatory Facilities in the Hospital:

Sr. No.	Facility	Availability	
		Yes	No
1	Operation Theater		
2	Clinical Laboratory		
3	X-Ray		

Additional Facilities:

1	
2	
3	
4	
5	

**Signature & Stamp of the Head of Hospital / Health Facility**

**Part V – Human Resource  
Teaching Faculty**

**Category:** \_\_\_\_\_ (use separate sheet for each category)

<b>Sr #</b>	<b>Name</b>	<b>Designation</b>	<b>Qualification</b>	<b>Government employee or not</b>	<b>If Govt. servant, NOC from concerned authority</b>	<b>Part / Full Time</b>
1.						
2.						
3.						
4.						
5.						
6.						

Name of Qualification of Course Coordinator : -----

**Signature & Stamp of Head of Institute**

**Documents to be attached:**

1.	Bank Draft of Rs. 7880/- in favour of Secretary, Punjab Medical Faculty, Lahore as process fee. For Continuation, it is not applicable.
2.	Bank Draft for inspection Fee Rs. 110,610/- in the name of Secretary Punjab Medical Faculty. For continuation, it is Rs. 63,210/-
3.	Deed of ownership of building or agreement for rented building or lease agreement (teaching campus and hospital)
4.	MOU with attached hospital ( in case the Institution does not own a hospital)
5.	Registration / License of hospital(s) with Punjab Healthcare Commission
6.	Lists of available equipments and chemicals specific for <u>each</u> category applied for
7.	Copies of academic qualifications of <b><u>all faculty members</u></b>
8.	Service contracts of employees (appointment letters & acceptance of employees)
9.	Legal undertaking on the prescribed format
10.	Relevant letter(s), in case of recognition by PMDC / CPSP
11.	Copies of Income Tax Return
12.	Institution's Prospectus (optional)
13.	Copy of the Bank Account in the name of Institute or owner of the institute