

CAPITAL DEVELOPMENT AUTHORITY
CAPITAL HOSPITAL ISLAMABAD

APPLICATION FORM FOR HOUSE JOB TRAINING

Photograph

PMDC Registration No _____ (Valid from _____ to _____)

PARTICULARS OF CANDIDATE

Name of the candidate _____

Father's / Husband name _____

Name of College _____

Date of birth _____ Domicile _____ Nationality _____

CNIC No. _____ Mobile No. _____

Date of passing MBBS _____ Session From _____ To _____

Note: Candidate who has passed final examination during last 12 months upto closing date of submission of application will be considered as Fresh Candidate.

DETAILS OF PROFESSIONAL EXAMINATIONS OF MBBS

Professional Examination	Date of Passing	Marks		Attempts Availed
		Marks Obtained	Max. Marks	
1 st Professional (Part-I)				
1 st Professional (Part-II)				
2 nd Professional				
3 rd Professional				
4 th Professional / Final year				

Either CDA Employees' son or daughter _____ (Yes) / _____ (No)
If yes then please provide documentary evidence

GENERAL

- a. Have you ever been removed or expelled from any Institution? **Yes / No**
(if yes)
i. Name of the Institution _____
ii. Year _____ Period of removal/expulsion _____
iii. Reason for punishment _____
- b. Any disciplinary action other than removal / expulsion taken against you like fines, compulsory migration etc. **Yes / No**
- c. Have you ever been convicted? **Yes / No**
- d. Are you suffering from any illness or disability? **Yes / No**
- e. Have you received any house job training? **Yes / No**
(if yes) Name of Hospital _____ Specialty _____
from _____ to _____

I hereby solemnly declare that:

- I have not completed one year House Job in any other institution/hospital.
- Will abide by the statues, Regulations and Rules etc framed by the Capital Hospital, Islamabad from time to time.
- Will maintain good behavior and pay all dues regularly.
- Will work diligently and maintain the dignity and prestige of the Capital Hospital, Islamabad both in and outside the Hospital.
- Will be a full time and regular trainee of the Capital Hospital and shall not accept any employment during the training period.
- That I will join the house job training for 06 months. If I want to quit the training in between then I shall submit my resignation one month before of its commencement otherwise I will pay one month's stipend in lieu of notice period.
- I will follow all the **Terms & Conditions** provided by the institution/department.
- The information given in the Application Form is correct to the best of my knowledge and belief. And if anything is found incorrect, Capital Hospital Islamabad will have the right to terminate my House Job.

Dated _____

Signature _____

Full Name _____

Present Address

Permanent Address

DOCUMENTS (PHOTO COPIES) TO BE ATTACHED:-

- | | |
|---|-----------------|
| a. Matric | Yes / No |
| b. F.Sc | Yes / No |
| c. MBBS (all professionals) | Yes / No |
| d. Attempts / Academic certificate from the Principal | Yes / No |
| e. Provisional Registration from PMDC | Yes / No |
| f. National Identity card | Yes / No |
| g. Two recent photographs | Yes / No |

Note: Incomplete applications will not be entertain.