



ELECTIVE / EXTERNSHIP APPLICATION FORM **(Undergraduate / Postgraduate university student)**

Please submit the completed application form along with required documents to:
Student Affairs Department, CMH Lahore Medical College & Institute of Dentistry, Lahore, Pakistan.
Email: info@cmhlahore.edu.pk

Surname: _____ **First Name:** _____

Male/Female: _____ **Date of Birth (dd/md/yyyy):** _____

Nationality: _____ **National ID / Passport No.:** _____

Address: _____

Phone number: _____ **Email address:** _____

Parent / Guardian Name: _____ **Phone Number:** _____

Name of home institution: _____

Address of home institution: _____

Program and year of study: _____

Date (month/year) you commenced program of study: _____

Date (month/year) of expected graduation / program completion: _____

English Proficiency

Mother tongue: _____ **Other languages spoken:** _____

Language of instruction at home institution: _____

If instruction not in English, any English test taken e.g. TOEFL, IELTS, other: _____

Date of test: _____ **Score achieved:** _____

Reference

Please give details of 02 academic referees at your institution who are familiar with your academic performance and abilities. Attach a signed and stamped letter of recommendation from each.

Referee 1: Name: _____ Designation: _____

Email address: _____ Phone No.: _____

Referee 2: Name: _____ Designation: _____

Email address: _____ Phone No.: _____

List 03 Elective / Externship subject choices in order of preference (Please refer to institutional website for a list of the available subjects in which electives / externships are being offered)

1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____

CMH LMC IOD reserves the right to accept / deny request for any subject for electives / externship.

How many weeks do you intend to spend on Electives / Externship at CMH LMC IOD? _____

Have you already taken part in an Elective Externship Placement? -----

If yes, where and when? _____

Declaration: I declare that the above information is a correct record.

Signature Date:

Check List

Please check when submitting your application that you enclose the following documents and /or their copies:

i.	Completed application form	
ii.	CNIC / NICOP / Passport	
iii.	Official letter of enrolment from home institution	
iv.	Marksheets / Transcripts	
v.	Reference letters	
vi.	04 passport size photographs with name on the back of each.	
vii.	Evidence of English language proficiency	
viii.	CV / Resume	
ix.	Statement of Purpose	
x.	Proof of payment of application processing fee	

Scanned copy of the application form and required documents may also be submitted in pdf format.

APPLICANT IS ADVISED TO RETAIN A COPY OF APPLICATION AND PROOF OF PAYMENT FOR FUTURE REFERENCE