



UIB Medical Faculty (IMS)

Almaty, Republic of Kazakhstan



Admission Form

Paste passport size photograph with white background

(USE GLUE ONLY)

Instructions

- ◆ Please complete all sections neatly in BLOCK LETTER
- ◆ Use Black/Blue ball pen only.
- ◆ Fill the form in your own handwriting.
- ◆ Candidate should mail scan copy of duly filled admission form to us.

Date :- ___/___/___

Personal Details

Name:- Mr/Ms

Mother Name Father/Guardian Name

Date of Birth Male Female

Full Address (Permantet address as on your Passport)

Email/Phone of Student or Parent

Postal Code Country

Nationality Place of Birth

Passport Number

Qualification

Details		
Certificate	Passing Year	Marks %
Matric/10th		
Sr. Sec/12th		

Declaration :- I declare that to the best of my knowledge the information i have supplied in this application form and documentation supporting is correct and complete.

Applicant Signature _____