



United College of Nursing & Midwifery

APPLICATION FORM

COMMUNITY MIDWIFERY (CMW)

Two week old passport size
photograph bearing the name
of the applicant
at the back.
Please staple

PLEASE PRINT OR TYPE IN BLACK INK CLEARLY

Please note that incomplete and incorrect information will disqualify the candidate from the admission process.

STUDENT INFORMATION

Name:																																											
Father's Name:																																											
Date of Birth:	D	D	/	M	M	/	Y	Y	Y	Y	Place of Birth:																																
CNIC / B-Form:											-											-											Domicile:										
Nationality:																									Religion:																		
Present Address:																									Postal Code																		
Permanent Address:																									Postal Code																		
Cell # (Mandatory):											Whatsapp #																																
Email (Mandatory):																																											
Marital Status:	Single				Married				Divorced				Widow(er)				Gender:	Male				Female																					
Applicant's Sibling:	Brother(s)				Sister(s)				Applicant's Children:		Son(s)				Daughter(s)																												

PARENT'S / GUARDIAN'S INFORMATION (IMPORTANT)

Name:																																											
CNIC No.:											-											-											Relationship:										
Occupation:											Designation:																																
Department:											Organization:																																
Office Address:																									Postal Code																		
Residential Address:																									Postal Code																		
Cell # (Mandatory):											Landline #																																
Email (Mandatory):																																											
Monthly Income / Salary: (PKR)																																											

ACADEMIC QUALIFICATION

Pakistani System of Education / British System of Education

Please Tick ☐		Secondary School Certificate (SSC)				☐		Ordinary Level (O-Level)	
Year	Board			Institute			City & Country		
Percentage (SSC/IBCC)	Biology		Chemistry		Physics		English		
	SSC	O-Levels	SSC	O-Levels	SSC	O-Levels	SSC	O-Levels	
	Marks	Grade	Marks	Grade	Marks	Grade	Marks	Grade	

Please Tick ☐		Higher Secondary School Certificate (HSSC)				☐		Advance Level (A-Level)	
(This Academic Field is Optional to Fill)									
Year	Board			Institute			City & Country		
Percentage (HSSC/IBCC)	Biology		Chemistry		Physics		English		
	HSSC	A-Levels	HSSC	A-Levels	HSSC	A-Levels	HSSC	A-Levels	
	%	Grade	%	Grade	%	Grade	%	Grade	

Graduation									
(This Academic Field is Optional to Fill)									
Year	Program			Institute			City & Country		
Total Marks		Obtained Marks		Grade / Division		Result Status			

Note: Minimum 40% Marks Required In Secondary School Certificate (SSC).

Copy of Equivalence Certificate issued by IBCC with minimum 40% aggregate score for O-Level & Overseas degree. Biology & Chemistry are essential subjects, Third subject is either Physics, Maths or any other. An Equivalence Certificate / Eligibility Certificate (as applicable) will be required to confirm your admission, if selected. (Visit www.ibcc.edu.pk)

If Entrance Test Taken At Any Other Institution

Name of Institution:																													
Program Applied For:											City:																		
a) If completed (write scores and attach score sheet if available)																													
Date of the Test		D	D	/	M	M	/	Y	Y	Y	Y	Score				Percentage				%									
b) Awaiting Results.																													
Date of the Test		D	D	/	M	M	/	Y	Y	Y	Y																		

Declaration:

I agree, if admitted to the United College of Nursing & Midwifery, to comply with college regulations. I certify that the information on this application is true and complete in all respects and that I have not withheld any information and I understand that misrepresentation, falsification of documents, or withholding of requested information are serious offences which can result in denial of admission or removal from institution and I am responsible for all of the information provided.

The statements I have made above are true. I agree to conform to the discipline of the selection process and to accept the decisions of United College of Nursing & Midwifery as final. I further undertake to sign and execute any legal documents if required, for the purpose of admission.

I undertake to abide by the rules & regulations of United College of Nursing & Midwifery.

I understand that admission will only be considered final once all fees have been paid.

Date of Application	Signature of Parent / Guardian	Signature of Applicant
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D	D	/	M	M	/	Y	Y	Y	Y
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Name : _____

Name : _____

Describe briefly in your own Handwriting your personality, your ambition and the motivation to become a Community Midwife.

Where did you hear about UCNM?

- a ☐ Facebook b ☐ Internet (if yes from which source) _____
- c ☐ Friend d ☐ Newspaper (if yes name of Newspaper) _____
- e ☐ Other (if yes from which source) _____

Check List (Please attach documents in serial order as listed)

- 1) ☐ Application form signed.
- 2) ☐ SSC Certificate **OR** ☐ O-Levels Equivalence Certificate 1 Attested Copy
- 3) ☐ SSC Marks Sheet **OR** ☐ O-Levels General Certificate 1 Attested Copy
- 4) ☐ If entrance test taken at any other Institution Or NTS. (Attach Result Copy) 1 Attested Copy
- 5) ☐ CNIC / B-Form 1 Attested Copy
- 6) ☐ Domicile & PRC C-Form 1 Attested Copy
- 7) ☐ Three recent colour passport size photos (with White Background Only).
Attach one on the front of the form.
- 8) ☐ Processing fee Rs. 2,000/-
- 9) ☐ Payment Mode
 - a) Cash (By Hand Submission of Application Form)
 - b) Payorder/Draft in favour of **United College of Nursing & Midwifery**. (If Submitting by Courier)
(Please write your name and CNIC number on the back of the Payorder / Draft.)

All documents should be Attested. Attestation to be done by Notary Public or graduating school Principal. Original documents will be inspected and verified from issuing authorities upon UCNM discretion.

Kindly submit above documents by hand / courier at the United College of Nursing & Midwifery, Korangi Creek Road, Behind CBM, Karachi. between 9am to 3pm, Monday to Friday (Excluding Public Holiday).

SUBMISSION

Submission of Form By Hand or Courier at Campus:
Student Affairs Department UCNM,
United College of Nursing & Midwifery
Korangi Creek Road, Behind CBM, Karachi, Pakistan.
Email: admission@ucnm.edu.pk
Contact No.: 0346-828-0070 / 0346-828-0071

ADMIT CARD

Please Provide Accurate Email And Cell Phone No.
(To collect In Person, visit campus on above address.)

TEST

Test Will Be Held At Campus
United College of Nursing & Midwifery
Korangi Creek Road, Behind CBM, Karachi, Pakistan.

ADMISSION

Selection List will be displayed after the Entry Test and Interviews.

ADMISSION ELIGIBILITY CRITERIA

- 1) Minimum 40% Marks are required in Matric-Science / SSC / O-Levels in Pre-Medical Group.
- 2) Entry Test is Mandatory for all Applicants.
- 3) Applicants holding Sindh Domicile will be given Priority for Admission.
- 4) Applicants upto the age of 40 are eligible to apply.
- 5) Only Female Applicants are eligible to apply.

DURATION OF THE PROGRAM

Community Midwifery - CMW (02 Years Diploma Program)
