

FREE OF COST

GOVT. SADIQ EGERTON GRADUATE COLLEGE BAHAWALPUR  
REGISTRATION FORM FOR MDCAT / ECAT

Coaching Session: 2024

Photo of student

Name: \_\_\_\_\_

Father's Name \_\_\_\_\_

CNIC / B-Form No. \_\_\_\_\_

Cell # (Student) \_\_\_\_\_

Cell # (Father/Guardian) \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Name of institute last attended \_\_\_\_\_

Group / Marks in 1<sup>st</sup> Year \_\_\_\_\_

Documents required:    Result Card of 1<sup>st</sup> Year ☐    Copy of CNIC / B-Form ☐  
   Father's/Guardian ID Card Copy ☐  
Group to Choose:    MDCAT ☐    ECAT ☐

AFFIDAVIT

I swear on oath that I have not paid any amount for admission in this program. Moreover, I will attend regular classes. If I am absent for more than two days in a week, my registration will be canceled and I have no objection.

Student Signature \_\_\_\_\_

Father / Guardian Signature \_\_\_\_\_

FOCAL PERSON  
MDCAT / ECAT  
Govt. Sadiq Egerton Graduate College  
Bahawalpur.