

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 1st Year _____

Documents required: Result Card of 1st 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.