Dow University of Health Sciences Karachi

Examinations Department

Ref No.: DUHS/EXM/2025-2463

NOTIFICATION

It is notified for information to the ***concerned eligible candidates*** of Dow Institute of Medical Technology, Ojha Campus & Affiliated Institute that the Examination Form & Fee of **First Year BS Medical Technology (BSMT) Semester-II Retake Examination 2024** will be accepted as following up to: **08th August, 2025** in the office of the respective College / Institute.

Examination Fee: As Per Fee Structure

IMPORTANT INSTRUCTIONS

The respective college will receive the forms, paid fee voucher & required documents from the eligible candidates and will submit to the Examinations Department, Dow University of Health Sciences within **THREE DAYS** with a list of candidates completing all the required formalities mentioned below. The Payment Voucher of Examination Fee of each candidate may be enclosed with the forms of the

1. *Photocopy of transcript of last appearing Exam.*
2. *Photocopy of the Enrolment Card.*
3. *Original Fee Paid Voucher.*
4. *Paid tuition fee voucher copy must be attached.*
5. ***Any other relevant document/ information can be asked to submit in addition to above.***

Dated: 30-07-2025

C.c to:

1. The Staff Officer to the Vice-Chancellor, DUHS.
2. The P.A to Pro-Vice-Chancellor, DUHS.
3. The P.A to Registrar, DUHS.
4. The Project Director, Dow University of Health Sciences.
5. The Director Finance, DUHS.
6. The Director, Dow Institute of Medical Technology, Ojha Campus.
7. The Director/Principal, Affiliated Institutes, DUHS.
8. The Director, CMS, DUHS.
9. The Officer Concerned, Web Portal, DUHS.
10. All Concerned.

Controller of Examinations

Dow University of Health Sciences Karachi

Examinations Department

Ref No.: DUHS/EXM/2025-2464

NOTIFICATION

It is notified for information to the ***concerned eligible candidates*** of Dow Institute of Medical Technology, Ojha Campus & Affiliated Institute that the Examination Form & Fee of **Second Year BS Medical Technology (BSMT) Semester-IV Retake Examination 2024** will be accepted as following up to: **08th August, 2025** in the office of the respective College / Institute.

Examination Fee: As Per Fee Structure

IMPORTANT INSTRUCTIONS

The respective college will receive the forms, paid fee voucher & required documents from the eligible candidates and will submit to the Examinations Department, Dow University of Health Sciences within **THREE DAYS** with a list of candidates completing all the required formalities mentioned below. The Payment Voucher of Examination Fee of each candidate may be enclosed with the forms of the

1. *Photocopy of transcript of last appearing Exam.*
2. *Photocopy of the Enrolment Card.*
3. *Original Fee Paid Voucher.*
4. *Paid tuition fee voucher copy must be attached.*
5. ***Any other relevant document/ information can be asked to submit in addition to above.***

Dated: 30-07-2025

C.c to:

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3. The P.A to Registrar, DUHS.
4. The Project Director, Dow University of Health Sciences.
5. The Director Finance, DUHS.
6. The Director, Dow Institute of Medical Technology, Ojha Campus.
7. The Director/Principal, Affiliated Institutes, DUHS.
8. The Director, CMS, DUHS.
9. The Officer Concerned, Web Portal, DUHS.
10. All Concerned.

Controller of Examinations

Dow University of Health Sciences Karachi

Examinations Department

Ref No.: DUHS/EXM/2025-2466

NOTIFICATION

It is notified for information to the ***concerned eligible candidates*** of Dow Institute of Medical Technology, Ojha Campus & Affiliated Institute that the Examination Form & Fee of **Fourth Year BS Medical Technology (BSMT) Semester-VIII Retake Examination 2024** will be accepted as following up to: **08th August, 2025** in the office of the respective College / Institute.

Examination Fee: As Per Fee Structure

IMPORTANT INSTRUCTIONS

The respective college will receive the forms, paid fee voucher & required documents from the eligible candidates and will submit to the Examinations Department, Dow University of Health Sciences within **THREE DAYS** with a list of candidates completing all the required formalities mentioned below. The Payment Voucher of Examination Fee of each candidate may be enclosed with the forms of the

1. *Photocopy of transcript of last appearing Exam.*
2. *Photocopy of the Enrolment Card.*
3. *Original Fee Paid Voucher.*
4. *Paid tuition fee voucher copy must be attached.*
5. ***Any other relevant document/ information can be asked to submit in addition to above.***

Dated: 30-07-2025

C.c to:

1. The Staff Officer to the Vice-Chancellor, DUHS.
2. The P.A to Pro-Vice-Chancellor, DUHS.
3. The P.A to Registrar, DUHS.
4. The Project Director, Dow University of Health Sciences.
5. The Director Finance, DUHS.
6. The Director, Dow Institute of Medical Technology, Ojha Campus.
7. The Director/Principal, Affiliated Institutes, DUHS.
8. The Director, CMS, DUHS.
9. The Officer Concerned, Web Portal, DUHS.
10. All Concerned.

Controller of Examinations

Dow University of Health Sciences Karachi

Examinations Department

Ref No.: DUHS/EXM/2025-2465

NOTIFICATION

It is notified for information to the ***concerned eligible candidates*** of Dow Institute of Medical Technology, Ojha Campus & Affiliated Institute that the Examination Form & Fee of **Third Year BS Medical Technology (BSMT) Semester-VI Retake Examination 2024** will be accepted as following up to: **08th August, 2025** in the office of the respective College / Institute.

Examination Fee: As Per Fee Structure

IMPORTANT INSTRUCTIONS

The respective college will receive the forms, paid fee voucher & required documents from the eligible candidates and will submit to the Examinations Department, Dow University of Health Sciences within **THREE DAYS** with a list of candidates completing all the required formalities mentioned below. The Payment Voucher of Examination Fee of each candidate may be enclosed with the forms of the

1. *Photocopy of transcript of last appearing Exam.*
2. *Photocopy of the Enrolment Card.*
3. *Original Fee Paid Voucher.*
4. *Paid tuition fee voucher copy must be attached.*
5. ***Any other relevant document/ information can be asked to submit in addition to above.***

Dated: 30-07-2025

C.c to:

1. The Staff Officer to the Vice-Chancellor, DUHS.
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8. The Director, CMS, DUHS.
9. The Officer Concerned, Web Portal, DUHS.
10. All Concerned.

Controller of Examinations