



MBBS AND BDS STUDENTS TRANSFER / MIGRATION POLICY

BAHRIA UNIVERSITY, ISLAMABAD

POLICY STATEMENT:

(Reference: PMC Medical and Dental Undergraduate Education (Admissions, Curriculum and Conduct) Regulations 2021)

1. A student enrolled in the medical or dental college can seek transfer to another college in the same program of the same level to a vacant seat available in the college.
2. There will be no restriction for the student to leave the college or transfer to another college. If more than one student applies against a vacant seat, then the transfer will be based on the merit. The merit list will also be displayed on the college website after all interested applicants have applied for transfer to a vacant seat.
3. Transfer is only permitted after 1st March of each year.
4. Registration from Pakistan Medical Commission shall be mandatory.
5. All colleges shall at all times publicly display any vacant seats available in each year of the program on the official website. Authority(PMC) will also be informed of such vacancy within fourteen days (14) of such vacancy occurring.
6. Tuition fee already paid will be adjusted to the period spent by the student in the program. In addition, there may be penalty of 10% of the total annual fee, in case the student leaves in the middle of the academic year.
7. A foreign student seeking transfer to a Pakistani College must have qualified the requisite NEB exam for the relevant academic year.

PROCEDURE FOR TRANSFERRING IN:

8. The student seeking transfer will apply in writing along with the certified documents as per attached application **(Appendix-1)** to the Principal of the respective college against the vacant seat.
9. The colleges will ensure that all the vacant seats have been publicly announced for at least fourteen days (14) and applicants' parent medical/dental college must be recognized by the PMC.
10. If there is more than one student seeking transfer, then final selection will be based upon merit. The merit list will also be displayed on the college website after all interested applicants have applied for transfer to the vacant seat. The same information will also be sent by email to PMC as an Excel or csv file by the concerned college.

11. Transfer to first year MBBS or BDS will be made on the basis of merit list, taking into account the MDCAT and HSSC / Equivalent scores (50% weightage to each will be given), which must not be less than the allowed percentage by PMC. Whereas, for transfer to 2nd year MBBS/BDS and beyond, the merit list will be made on the basis of the relevant previous professional scores of the applicant.
12. An equivalence committee shall also be nominated for determining the merit of the applicants at respective college, which will be chaired by its Principal. While determining equivalence, the committee will prepare a comparative matrix of subjects already qualified at previous institute and mapped to approved program roadmap being followed at BU along with conversion of grades into percentage. After approval of migration on merit, the same equivalence certificate will be used by Exams Dte, BUHO for registration of transferred students.
13. Application of the selected student(s), along with the details of vacant seats / merit list and equivalence certificate (if applicable) will be forwarded to BUHO (HS Dte) by the concerned Principal for the approval of the CA.
14. At BUHO, the application will be processed as a case file, while ensuring that all rules /policies of PMC are fully complied with.
15. After approval of the CA, the student will be permitted to join the desired college as per its terms and conditions.
16. PMC will be informed by the college immediately once the student joins the program under intimation to BUHO.

PROCEDURE FOR TRANSFERRING OUT:

16. Student seeking transfer out will submit the application in writing to the concerned college.
17. Student will get the clearance from the college including all the dues and he/she will be charged as per PMC regulations.
18. There will be no formal requirement of NOC but, Clearance Certificate shall be handed over to the students after all necessary procedures have been complied with by the college.
19. All vacant seats are to be informed to PMC by the college within fourteen days (14) of such vacancy occurring under intimation to BUHO.



Appendix - 1

APPLICATION FOR TRANSFER / MIGRATION TO BU CONSTITUENT / AFFILIATED MEDICAL & DENTAL COLLEGE

Paste your
Pic here

Intended Program / College of Transfer:

1. Program (MBBS/BDS) _____ College _____

2. Year _____

Personal Data: (Type or write in Block Letters)

3. Name: _____ Male / Female (please tick)

4. Date of Birth _____ 5. Nationality: _____

6. C.N.I.C/NICOP#: _____ Passport No: _____

7. PMC Students Registration no: _____

8. Fathers' Name: _____

9. Present Postal Address _____

10. Telephone No. _____ Mobile No. _____

E-mail _____ Fax No. _____

11. Permanent Address: _____

12. Name of Present Institution / Affiliated University _____

PMC Status: Recognized / Not Recognized (please tick)

13. Basis of Admission (please tick / specify)

a. Open Merit b. Quota Seat c. Any other _____

Present Session: _____ **Mode of Study:** Annual / Semester _____

14. Have you applied in MBBS or BDS undergraduate program on basis of the following:

(please tick all which are appropriate)

- a. MDCAT
- b. NUMS Entry Test basis.

If yes, please give following details: -

a. MDCAT Registration No. _____ Year of applying _____

MDCAT Marks: _____

PMC Merit score: _____ PMC Merit Standing: _____

b. NUMS Registration/Roll No _____ Year of applying _____

NUMS Entry Tests Marks: _____ NUMS Merit position: _____

15. Have you ever applied for transfer to BUM&DC or other Medical and Dental college before:

- a. Yes
- b. No

If yes when? _____ To, which college and program? _____

What was the decision? _____

16. Academic Data (Provide transcripts and reports of all results)

Degree/ Cert	Name of School/ College/ University	From	To	Division GPA/ Grade	Marks Obtained (in%)	Major Subjects
Matric O' Levels Others						
FA/F.Sc A' Levels Others						
Others (Specify)						

17. Record of Performance at Medical / Dental College:

Examinations	Years	Annual/ supplementary	Marks obtained/Max. marks	Number of Attempts
1 st professional MBBS/BDS	From: To:			
2 nd professional MBBS/BDS	From: To:			
3 rd professional MBBS/BDS	From: To:			
4 th professional MBBS	From: To:			

18. **Academic Achievements:**

Distinctions, awards and other recognitions of academic achievements (Please indicate the basis of selection and date of each listing).

19. **Reasons of Transfer** (Be specific and to the point. Clearly indicate changes in circumstances, which render it difficult for you to continue education in your present institution)

20. **Undertaking:**

I have read the details given in the application form for the transfer of students. I hereby apply for admission to _____ as a transfer student and certify that, to the best of my knowledge, all the above statements are complete and correct. I also declare that I have never been involved in any illegal activities. I understand that any attempt to influence the admission process or providing false or incomplete information would result in my disqualification or dismissal from the program at any stage. I agree to abide by all the rules and regulations of _____. I also understand that upon admission I will be required to pay the admission fee, security deposits and all other prescribed emoluments and tuition fee on pro-rotta basis within the prescribed time.

Applicant's Signature: _____

Date: _____

Applicant's name: _____

21. Declaration by Father/Guardian of The Applicant:

I hereby declare that this application of transfer is being submitted with my consent and I agree to honor my responsibilities in this regard.

Dated: _____

Signature of the Father/Guardian _____

22. Character Certificate from where Transfer is being made:

Certified that the applicant bears good moral character and has not been debarred from taking University examinations or suspended or not expelled or rusticated from University or Institution from which he/she intends to migrate and that no disciplinary action is pending against him/her. The applicant has never been involved in any indiscipline or unfair means during his/her stay at this Institution. I also certify that the applicant was not admitted against any reserved seat for special categories.

Signed by:
Principal/Vice-Principal/Registrar
(with Official Seal)

Date: _____

Please attach following documents with the transfer form: -

- a. Official transcript of last program studied at parent university.
- b. Photo copies of marks sheets of Matric and FSc/equivalent examinations.
(equivalence certificates from IBCC, Pakistan in case of O/A level/ equivalent exams).
- c. MDCAT and NUMS result
- d. Clearance certificate by the previous institution.
- e. Detailed course outlines of the courses already studied.
- f. Bank Draft amounting to Rs. 5000/- (Rupees five thousand) in favor of concerned Constituent / Affiliated Medical or Dental College as processing fee (non-refundable).
- g. Passport size Photograph
- h. Copy of CNIC
- i. Health Certificate
- j. Vaccination Certificate

Note: a. Incomplete applications will not be entertained. So please do not leave any field blank. Write on extra sheet, if required and attach with the application.

b. Duly completed transfer form along with above-mentioned documents may be forwarded to Principal of concerned Constituent / Affiliated Medical or Dental College.

23. The case for transfer from above mentioned institution to our Medical/Dental College has been critically examined by the committee and it is recommended that transfer of student Mr./Miss _____ be accepted / not-accepted to join _____ year with MBBS/BDS (please strike which is not applicable)

RECOMMENDED / NOT RECOMMENDED

Signatures of
Principal/ Dean
(with Official Seal)

Dated: _____