For Office Use Only
S. No. _____
Roll No._____
A.No._____

PAKISTAN MARINE ACADEMY
Hawksbay Road Mauripur
KARACHI-75780
Ph: (021) 99241201-5
Fax: (021) 99241206

Paste Recent Photograph

APPLICATION FORM FOR INDUCTIONAS NAUTICAL / ENGINEERING CADET 54thBATCH (Session 2016-17)

Tick whichever is applicable

Open Merit	Self Finance Scheme	Both

Note:- Please fill in legible handwriting and block letters (See instructions on reverse of Page)

1. **Name of Candidate:**_____
   (in full as in Matric Certificate / Equivalent)
2. **Date of Birth:**_____
   (As recorded in Matric Certificate / Equivalent)
3. **CNIC / Form B #:**_____
4. **Father's Name:** _____
   (as mentioned in CNIC)
5. **Father's CNIC #:** _____
6. **Domicile of Candidate:**_____
   (Punjab, Sindh Urban, Sindh Rural, Baluchistan, Khyber Pukhtoonkhaw, Azad Kashmir, FATA/FANA)
7. **Academic Qualifications:**

S No.	Examination	Year of Passing	Total Marks / GPA	Marks Obtained / GPA	% age gained	Board Attended
a.	Matriculation / Equivalent					
b.	Intermediate / Equivalent					
c.	Other					

8. **Postal Address :** _____
   _____
   E Mail:_____**Telephone # :**_____**Mobile #:**_____
9. **Choice of Branch** (Nautical / Marine Engineering): _____
10. **Choice of Station for Entrance Test**Karachi,Islamabad,Peshawer,Sukkur,Quetta,Lahore,Multan.
    First Choice:_____Second Choice:_____
11. **Choice of Station for Medical Examination (**Muzzafarabad(AJK),Abbotabad,Multan,Peshawar, Kohat,Kharian,Hyderabad, Sargodha, Bhawalpur, PanuAquil, Quetta, Islamabad, Karachi, Lahore):
    First Choice :_____**Second Choice** : _____
12. **Details of Bank Draft/Pay Order**(Please mention your Name, Address and Cell No on the reverse of Bank Draft/Pay Order):

S#	Amount	DD/Pay Order	Dated	Bank
a.	**Rs. 2000/-**			
b.	**Rs. 300,000/- (for SFS candidates only)**			

13. I have read all the information contained in the PMA Prospectus / Website regarding admission. I declare that all information given above is correct to the best of my knowledge and belief and no information has been concealed or misrepresented . I understand that my admission is liable to cancellation if I hide / conceal /mis-represent any facts, observed during or after my selection.

Signature of Applicant

INSTRUCTIONS FOR FILLING UP OF ADMISSION FORMS

1. Read these instructions carefully prior filling of admission forms.

2. This form contains **four pages** and can be downloaded from PMA website. Photo copy of this form is also acceptable.

3. Type or write in CAPITAL letters.

4. Application forms received with false, tampered or illegible form will be rejected summarily and no appeal against its rejection would be entertained.

5. Candidates awaiting results to provide HSC (1st Year)/Equivalent marks sheet alongwith & a certificate from their College Principal that they have a good chance of passing the HSC/Equivalent Examination at least 2nd Division).

6. If candidate's own Domicile has not been issued then attach father's domicile.

7. Any change of postal address should be promptly notified to the **Officer Incharge New Entry** of Pakistan Marine Academy.

8. You are requested to frequently visit PMA Website for results and updates.

9. Applications received after due date will not be entertained.

10. For any queries/clarifications, please visit our website **www.marineacademy.edu.pk** OR contact:

OFFICER INCHARGE NEW ENTRY
Pakistan Marine Academy
Hawksbay Road Mauripur Karachi - 75780
Tel: 021-99241201-5 Ext 214
Fax 021-99241206

CHECK OF LIST FOR SUBMISSION OF FORMS

1. All entries are filled.

2. Recent passport size coloured photograph have been pasted on the forms.

3. Attested Photocopies of following documents have been attached:

   a. Matriculation / Equivalent certificate.
   b. HSC/Equivalent mark sheet.
   c. CNIC or Form "B" of the candidate.
   d. CNIC of the Candidate's Father /Guardian
   e. Domicile

4. Bank Draft OR Pay Order (in original, not photocopy) of Rs.2000/- (Non-Refundable) in favour of ***"PAKISTAN MARINE ACADEMY KARACHI".*** For banks at Karachi: NBP, Pak Marine Academy Branch, Code-0239.

5. Bank Draft OR Pay Order (in original, not photocopy) of Rs.300,000/- in favour of ***"PAKISTAN MARINE ACADEMY KARACHI".*** For banks at Karachi: NBP, Pak Marine Academy Branch, Code-0239 (for Self Finance Scheme Candidates only).

6. Admission form has been signed by the candidate.

Signature of Applicant---------

PAKISTAN MARINE ACADEMY
Hawksbay Road Mauripur
KARACHI-75780

ADMIT CARD FOR ENTRANCE TEST
_____ Batch

Paste
Recent
Photograph

For Office Use Only

Roll No: _____ **Date of Entrance Test:** _____ **Time:** _____

Address of Test Centre: _____

_____

1. **Name of Candidate:** _____
2. **CNIC / Form B #:** _____
3. **Father's Name:** _____
4. **Father's CNIC #:** _____
5. **Postal Address:**_____

   _____
6. **City:** _____ **Cell No of Candidate:**_____
7. **Cell No of Candidate's Father:** _____ **Land Line No:** _____

Signature of candidate

PAKISTAN MARINE ACADEMY
Hawksbay Road Mauripur
KARACHI-75780

ADMIT CARD FOR ENTRANCE TEST
_____ Batch

Paste
Recent
Photograph

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Roll No: _____ **Date of Entrance Test:** _____ **Time:** _____

Address of Test Centre: _____

_____

1. **Name of Candidate:** _____
2. **CNIC / Form B #:** _____
3. **Father's Name:** _____
4. **Father's CNIC #:** _____
5. **Postal Address:**_____

   _____
6. **City:** _____ **Cell No of Candidate:**_____
7. **Cell No of Candidate's Father:** _____ **Land Line No:** _____

Signature of candidate

Write your NAME and POSTAL ADDRESS (in full) in each of the four address slips below. These slips will be used for future correspondance.

Roll No: _____ (to be filled by PMA)

Name: _____

Father's Name: _____

Address: _____

_____

_____

City: _____Tele No_____ Cell No._____

Roll No: _____ (to be filled by PMA)

Name: _____

Father's Name: _____

Address: _____

_____

_____

City: _____Tele No_____ Cell No._____

Roll No: _____ (to be filled by PMA)

Name: _____

Father's Name: _____

Address: _____

_____

_____

City: _____Tele No_____ Cell No._____

Roll No: _____ (to be filled by PMA)

Name: _____

Father's Name: _____

Address: _____

_____

_____

City: _____Tele No_____ Cell No._____