



SHAHEED BENAZIR BHUTTO INSTITUTE OF TRAUMA

APPLICATION FORM
For Postgraduate Training Programs



Registration No:	(002351) Kindly note this for future reference.	Date	2025-04-28 01:01:14
SPECIALITY		FCPS-II RADIOLOGY	
Personal Detail			
Full Name		Fathers Name	
Javairia Ghori		M. Mahfooz Khan Ghori	
Gender	Marital Status	Email	
Female	SINGLE	jyaghori@gmail.com	
Date of Birth	Domicile	CNIC Number	
1998-07-09	Karachi Central	42201-7782562-2	
Nationality	City		
Pakistani	Karachi		
Mobile 1	Mobile 2	FIRST GENERATION	
0314 2755929	0335 3277821	No	
Home Address			
House no. A 40 G/Floor, block 13, Gulshan-e-Iqbal			
OTHER INFORMATION			
Graduate Form	MBBS Passing Year	House Job 1	
MBBS	2022	Medicine	
House Job 2	PMDC #	PMDC Valid Date	
Surgery	778624-02-M	2026-04-07	
Government / PVT Employee	FCPS-1 Status	FCPS-1 Cleared Date	
PVT	Waiting For Result	0000-00-00	
FOR SUB-SPECIALITY CANDIDATES ONLY			
02-Years Complete in MED/SUR	Date of Completion	Date of Commenced	
	0000-00-00	0000-00-00	
RTMC #	Certificate Issued	Training Institute	
Name of Supervisor			

Student Signature: _____

Javairia

Challan No: 002351

SMBBIT Account's Copy



**SHAHEED MOHTARMA BENAZIR BHUTTO
INSTITUTE OF TRAUMA KARACHI
POST GRADUATE MEDICAL EDUCATION**

POSTED
Sindh Bank Limited
Timber Market Branch, Karachi (0315)
A/C # 0315-387300-6101

SINDH BANK
سندھ بینک

Due Date: 05-May-2025

Student C.N.I.C #

42201-7782562-2

Student Name: Javairia Ghori

Father's Name: M. Mahfooz Khan Ghori

Course: FCPS-II RADIOLOGY

Detail Of Fees	Amount
Application Processing Fee	5000
Total Fee	5000
Rupees Five Thousand	

The fee amount can be deposited in any Sindh Bank branch in Pakistan

Pay Order No./Cash:

Bank Name:

Receiving Branch
Stamp & Signature

Depositor Signature

MAHFOOZ KHAN GHORI
Depositor Name & CNIC
42201-2948503-9

Note: "No payment will be received after the expiry of the due date"

Challan No: 002351

Student's Copy



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