To be filled in by candidate. (Please read the following instructions.)

The Acknowledgement Card below is to be detached by the Examination Department of the College of Physicians & Surgeons Pakistan and sent duly stamped and signed to you as acknowledgement of receipt of application. Candidate must fill-in the information on **back side** of the Acknowledgement Card carefully to ensure prompt acknowledgement of his/her application.

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SUBJECT CENTRE REF/COMP NO.

COLLEGE OF PHYSICIANS AND SURGEONS PAKISTAN

7th Central Street, D.H.A. Phase II, Karachi-75500. Tel: 99207100-10 Fax: 35881444, 99207120
UAN: 111-606-606 E-mail: examinations@cpsp.edu.pk Web-site: www.cpsp.edu.pk

INTERMEDIATE MODULE EXAMINATION MARCH 20, 2012
ACKNOWLEDGEMENT CARD

Dear Doctor,

Your application to appear in the above Examination has been received and is being scrutinized.
The Admit Card will be dispatched to you, if you are found eligible.
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Important Note:

For quick and effective communication all correspondence with the candidates will be done through e-mail in future. A hard copy of the same will be mailed to the candidates through ordinary surface mail. It will be mandatory for every trainee to provide CPSP his/her e-mail address for correspondence. Please always remember to mention your Ref/Comp. No., Enrol. No. / RTMC Reg. No. while making any query, request or replying any e-mail to CPSP, failing which your correspondence will not be responded.

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		Signature **Controller IMM Examination**

P.T.O.

TO BE FILLED IN BY THE CANDIDATE (in Capital Letters)

To,

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