

Pay Release Request Proforma (Sub-Specialty)

SUB-Specialty SESSION _____

Staple one
photograph here

Name: _____

Father Name: _____

Domicile: _____

Husband Domicile (Married TMO's): _____

Job Status (Before Joining Training): Private (Unemployed) Govt/Semi-Govt/ Autonomous

(Tick one box and specify your employer prior to joining training and provide E.O.L, Last Pay Certificate (LPC) or Resignation order as the case may be)

Address: _____

NIC Number: _____

Office Order No: _____

Serial No (in office order): _____

DOA (Arrival Date): _____

DOC (Completion Date): _____

Hospital: _____

Ward/ Unit: _____

Specialty: _____

Contact No: (your own cell no. of which you can be contacted) _____

Documents Required:

- Attested CNIC (1 copy)
- Arrival Report (1 copy)
- Office Order relevant page (1 copy)
- General 2 year Experience (1 Copy)
- Previous RTMC & Experience certificate in case of previous Training.
- E.O.L & Last Pay Certificate / Pay Stoppage Certificate (for Govt TMOs)
- Husband Domicile (For married Female trainees)
- Husband Posting Order & Service Certificate (For Army Spouses)
- Sub-Specialty RTMC Attested Copy
- Duty/Experience Or Attendance Certificate (Fresh up to date)
- Non - Accommodation Certificate
- **Note: Submit these documents before 18th of the month. No case will be entertained / accepted after the mentioned date.**

Signature