AGA KHAN UNIVERSITY
Visiting National Student Application for Electives - 2019

1. The attached form has two sections. Section A is to be completed by the Applicant. Section B is to be completed by the (Applicants) Dean or the Dean’s designated officer. Please note that electives at AKU are offered as per the calendar mentioned on page 2. Approximately four weeks duration is the minimum period for elective rotation in one discipline.

2. Section A and B of the application form must be completed and hardcopy should be mailed to the address given in section 5. Applications must include photocopies of mark sheets / transcripts of all professional/semester examinations written to-date (these should be attested by your university) and photocopy of CNIC (photocopies should be cut in the size of application form).

3. An application must reach the Electives Office at least three months prior to the month in which elective rotation is requested (calender given at page 2).

4. The non-refundable application processing fee for electives placement is Rs. 2,500/- The fee is payable through a bank draft/pay order in favour of “Aga Khan University” drawn on a bank in Karachi. Applications will not be processed without the processing fee. (AKU NTN # 1206240-5)

5. All correspondence must be addressed to:

Elective Office
Telephone: (9221) 3486 5531 / 4537
Office of the Registrar
Fax: (9221) 34934294 / 34932095
Aga Khan University (SONaM Building)
E-mail: elective.national@aku.edu
Stadium Road, P.O. Box 3500,
Karachi 74800, Pakistan.

6. The University hostels have non-air-conditioned, single and shared, furnished room accommodation with communal washroom and laundry facilities. The students pay for their living expenses in Pakistani currency. The room rent is 1Rs. 23,300/- per month. Food, which may be purchased from the cafeteria, may cost up to Rs. 400/- per day. Due to shortage of rooms, it is not always possible to get accommodation in the hostels. If accommodation will be availed, a security deposit of Rs. 10,000/- will be required as a separate bank draft / pay order in the name of “Aga Khan University”. Upon completion of the electives and clearance the security deposit, after any deduction, will be refunded to the applicant.

7. Health care facilities are available in the Aga Khan University Hospital on self-payment.

8. Who is eligible to apply?
Opportunities for electives are limited in each discipline. Students meeting the following criteria may apply:

- Students should have cleared all exams in first attempt;
  - with an equivalent average of 2.5 cGPA or at least 65% in semester examination.
  - an overall of 65% in Professional examinations (aggregate).

- A student is allowed to do electives only once for a maximum of four weeks during his/her formal academic career in a medical/allied health sciences programme. *Effective January 2010

PLEASE NOTE: SUBMISSION OF AN APPLICATION DOES NOT GUARANTEE CONFIRMATION OF YOUR PROPOSED ELECTIVES.

STUDENT WHO HAVE ALREADY WRITTEN THEIR FINAL YEAR PROF. EXAM IS NOT ELIGIBLE FOR ELECTIVE

FOR PLACEMENTS IN BASIC SCIENCES AND COMMUNITY HEALTH SCIENCES (RESEARCH):

- Students in their first, second, third or fourth year of their medical schools may apply.
- Students studying in A-Level or Intermediate (pre-medical) may apply.

Rotations

1) Biological & Biomedical Sciences (BBS): (Opportunities not available in July and August.)
   i) Anatomy
   ii) Physiology
   iii) Pharmacology
   iv) Biochemistry

2) Community Health Sciences (CHS)

1 subject to change
ELIGIBILITY FOR CLINICAL ROTATIONS

Students, who have successfully completed required professional examination, as indicated below, may apply for clinical rotations.

A. Upon successful completion of second professional examination or six semesters (in MBBS Year IV or V) applications may be submitted for:
   1) Pathology & Microbiology:
      i) Clinical Microbiology
      ii) Molecular Pathology
   2) Pulmonology
   3) Radiology
   4) Paediatrics
   5) Family Medicine

B. Upon successful completion of third professional examination or eight semesters (in MBBS final year) applications may be submitted for:
   1) Medicine:
      i) General Medicine
      ii) Cardiology
      iii) Gastroenterology
      iv) Infectious Diseases
      v) Neurology
   2) Surgery:
      i) General Surgery
      ii) Orthopaedics
      iii) Otolaryngology
      iv) Neurosurgery
      v) Ophthalmology
      vi) Urology
      vii) Cardiothoracic Surgery
      viii) Paediatric Surgery
   3) Anaesthesia
   4) Psychiatry
   5) Obstetrics & Gynaecology: (females only)
   6) Physiotherapy
   7) Emergency Medicine
   8) Oncology

Elective Rotation Dates and Application Deadlines 2019
(No variations on these dates are acceptable)

<table>
<thead>
<tr>
<th>Rotation month</th>
<th>Rotation dates</th>
<th>Application submission period</th>
</tr>
</thead>
<tbody>
<tr>
<td>JANUARY</td>
<td>January 1 – 31, 2019</td>
<td>October 1 - 31, 2018</td>
</tr>
<tr>
<td>FEBRUARY</td>
<td>February 1 – 28, 2019</td>
<td>November 1 - 30, 2018</td>
</tr>
<tr>
<td>MARCH</td>
<td>March 4 – 29, 2019</td>
<td>December 3 - 31, 2018</td>
</tr>
<tr>
<td>APRIL</td>
<td>April 1 – 26, 2019</td>
<td>January 1 - 31, 2019</td>
</tr>
<tr>
<td>MAY</td>
<td>May 6 – 31, 2019</td>
<td>February 1 - 28, 2019</td>
</tr>
<tr>
<td>JUNE</td>
<td>June 3 – 28, 2019</td>
<td>March 1 - 29, 2019</td>
</tr>
<tr>
<td>JULY</td>
<td>July 1 – 26, 2019</td>
<td>April 1 - 30, 2019</td>
</tr>
<tr>
<td>AUGUST</td>
<td>August 5 – 30 , 2019</td>
<td>May 1 - 31, 2019</td>
</tr>
<tr>
<td>SEPTEMBER</td>
<td>September 2 – 27, 2019</td>
<td>June 3 - 28, 2019</td>
</tr>
<tr>
<td>OCTOBER</td>
<td>October 1 – 31 2019</td>
<td>July 1 - 31, 2019</td>
</tr>
<tr>
<td>NOVEMBER</td>
<td>November 4 – 29, 2019</td>
<td>August 1 - 30, 2019</td>
</tr>
<tr>
<td>DECEMBER</td>
<td>December 2 – 27, 2019</td>
<td>September 2 - 30, 2019</td>
</tr>
</tbody>
</table>

• Students will be notified of the University decision approx. 4 weeks before the commencement of the requested elective rotation. Please do not call us or visit us in person.
• Registration fee of Rs. 3,000/- (non-refundable) is required via bank draft / pay order to confirm the electives. (This is not required with the application but only required when you will be selected)
• At the conclusion of the 4 week electives, an evaluation will be provided upon receipt of clearance.
• Application collection and submission time on working days: Monday to Friday 2:00 pm to 5:00 pm at Office of the Registrar counter located in the School of Nursing and Midwifery, Aga Khan University.
• Those outside Karachi may send their request via reliable courier service / postal mail to the addresses given in section 5.

Note: Elective offer will stand CANCELLED for selected students not joining on approved dates.

University reserves the right to amend the eligibility criteria or procedures as and when appropriate.
AGA KHAN UNIVERSITY
Visiting National Student Application for Electives - 2019

SECTION ‘A’: To be completed by the student

Please Note: Incomplete form will not be processed.
To be filled in block letters.

Name: ____________________
Father’s Name: ____________
Surname: ________________
Mailing Address: ______________________________
Tel No: _______________ Cell No: _______________ Country of Origin: ___________
E-mail: __________________
Name of Institution Currently Enrolled: __________________
Duration of Medical Programme: ____________ Graduation Date (final year exam): ____________
Choice of Discipline for Electives: (1) _______________ (2) _______________
(Please mention in order of preference)
Proposed Month for Electives: __________________
Do you require accommodation (Applicable for students from outside Karachi) ☐ Yes ☐ No

Note: Due to shortage of rooms, it is not always possible to provide accommodation in the hostels.
Objectives of your Proposed Electives (attach separate sheet)
______________________________________________________________________________
__________________________________________________________________________________

Date: ____________________ Signature of Student

SECTION ‘B’: To be completed by DEAN or REGISTRAR of student’s school (not relative)

Name of Student: ______________________________

Has the student completed following basic clinical rotations (please check [✓] the completed rotations):

☐ Medicine ☐ Paediatrics ☐ Dermatology ☐ Anaesthesia ☐ Ophthalmology
☐ Surgery ☐ Psychiatry ☐ Otolaryngology ☐ Orthopaedics ☐ Obstetrics & Gynaecology

Yes ☐ No ☐
☐ ☐ The student is approved to take this elective.
☐ ☐ The student is in good standing at this institution.
☐ ☐ The student will be covered by health and malpractice insurance through this institution.
☐ ☐ Has student been involved in disciplinary issues?
☐ ☐ Student understands that in case of illness or health related emergency or issue, the liability of
care and payment will be on the parent institution / student.
☐ ☐ Student understands that acting against code of conduct lead’s to immediate termination of elective.
☐ ☐ An evaluation report will be required at the end of the electives.

During the period of elective, student will be in ______ year of MBBS programme.
His / Her expected date of final year examination is _______________ (month and year).

Signature: ______________________ Date: ________________

Name: ______________________________
Title: ______________________________
E-mail: ____________________ Phone number ____________________
Address: ______________________________

Affix Photograph (size 1.25 x 1.5 in)