

**POKHARA UNIVERSITY**

**FACULTY OF HEALTH SCIENCES**

**Announces Admission for Bachelor of Optometry (B.Optom.) Program (4 years )  
for 2076 BS(2019AD)**

***A Joint Constituent Program of Pokhara University at Himalya Eye Hospital, Gharipatan Pokhara, Kaski***

***First date of Publication: 06 August 2019***

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| **Programs** | **Seats** | | **Eligibility** | **Remarks** |
| **Merit Scholarship** ( Entrance Topper will get scholarship for first semester **)** | **Paying** |
| Bachelor of Optometry (B.Optom) | 1 | 14 | Higher Secondary Level (10+2 science streams) Biology group or equivalent or Diploma in Health Sciences (Ophthalmology) or Certificate in Health Science (ophthalmology as recognized by Pokhara University with at least 50% marks.  Or  Minimum 2.4 CGPA in Aggregate and Minimum C+ Grade in Physics, Chemistry and Biology (PCB) and Minimum C Grade in other subjects. | Hard copy Submission  or  Submission through Email\* |
| Note: In case of the subject with theory and Practical, the average grade point will be considered. \*All required documents should be scanned and sent through email and the original documents should be verified on Aug 29, 2019 in case of submission through email.  **Email:** [**b.optometryadmissionpu19@gmail.com**](mailto:b.optometryadmissionpu19@gmail.com) | | | | |

**Important activities and dates**

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| **Activities** | **Date and time** | | **Remarks** |
| Application starts | 06 Aug 2019 | |  |
| Last date of application submission | 28 Aug 2019 | |
| Admission card distribution  and document verification for applicants through email | 29 Aug 2019 Time: 2:00pm-5:00pm | |
| Date and time of Entrance Examination | 30 Aug 2019 Time: 8:00 am – 10:00am | |
| Exam Center | Himalaya Eye Hospital, Gharipatan, Pokhara-17, Kaski | |
| Date of Admission (Successful candidates- first round) | 09 Sept 2019 | |
| **Required Documents** | | | |
| **Original document**   1. \*\*Bank voucher of NRs 1600.00 2. Two copies of PP size photo 3. Duly filled application form ( application form can be downloaded from the given websites)   **Photocopies**   1. SLC/SEE Mark Sheet 2. 10 +2/Diploma /Certificate/Transcript/Mark Sheet 3. Citizenship | | | |
| \*\*Account detail :  **A/C holder :**FACULTY OF HEALTH SCIENCES, PU **Bank:** Prabhu Bank  **A/C No.** 06800101160643000001 | | | |
| **For contact and application submission**  Himalayan Eye Hospital, Gharipatan, Pokhara-17, Kaski  Contact no.: 061-461168, 460458  Website Link: <https://heh.org.np> | | **Any query/detail**  Faculty of Health Sciences, Pokhara University  Dhungepatan, Pokhara -30, Kaski  Tel: 061-504072 Website Link: <http://pu.edu.np> | |