

The Director

Karachi.

DOW UNIVERSITY OF HEALTH SCIENCES INSTITUTE OF HEALTH MANAGEMENT



Enrolment No. _

Photograph

Please Paste Don't Staple

Subject: ISSUANCE OF PROVISIONAL CERTIFICATE

Sir,

To,

I have passed my Final year_____ Examination Annual / Scheduled of DUHS 2013 held in 2013 kindly issue me provisional certificate and obliged.

My Particulars are given below:

Institute of Health Management

Name: Dr	Father's Name:									
Enrolment #		Domic	ile	eNationality			Passport #		Issue Date	
	esent Address:									
Permanent Address:										
Phone (Res.):				Date of Birth			I Place of		f Birth	
Date of Admission in 1st	Year MBB	Sess	Session:Admi		t in which college					
Medical College / Cate	gory of Se	at								
For Migration Cas He / She was admitted	•	lege on _							s on Migra	ation from
	1 st Year		2 nd Year		3 rd Year		4 th Year		Final Year	
	1 st Semester	2 nd Semester	3 rd Semester	4 th Semester	5 th Semester	6 th Semester	7 th Semester	8 th Semester	9 th Semester	10 th Semester
Examination										
Annual / Retake / Supplementary Examination										
Examination of										
Held in the Year										
Seat No.										
Total Marks										
Result										
Clearing Certificate	from the f	following	sections a	are attach	ed herew	ith:	Provisio	nal Certific	ate No.	

Clearing Certificate from the following sections are attached herewith:

1) Clearance from College Library:	- Signature	_Stamp	
2) Hostel Warden: Not Availed Availed	Signature	_Stamp	
3) Hostel Accountant Fee Cleared: (All fee vouchers attached	Signature	_Stamp	
4) Accounts Branch DIMC:	- Signature	_Stamp	
5) College identity Card (Original Return) attached	l with form:	YES	NO
6) Photograph one (Pasted on Form)		YES	NO
7) Employment Exchange Certificate from Pakista	ni only. Foreign National		
student should attach valid passport photocopy.		YES	NO
8) Enrolment Card (Attached with form & photoco	рру)	YES	NO
9) All Mark sheets pass & fail required		YES	NO
10) Grade Book: (Photocopy)		YES	NO

Date	Sessions			
Annual / Supply of 20				
1 st Year Roll No.				
Date of Admission				
Date of Graduation				

Candidate's Signature