

DOW UNIVERSITY OF HEALTH SCIENCES DOW MEDICAL COLLEGE, KARACHI

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The Principal									Photo	ograpn	
Dow Medical Colle Karachi.		Form No					Please Paste Don't Staple				
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Subject: ISSUANO	JE OF P	ROVISIO	JNAL C	ERTIFIC	AIE	Enro	ment # Dl	JHS/D/			
Sir, I have pass	ed my F	inal vea	r MBBS	Examin	ation Ar						
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My Particulars ar	e given b	oelow:									
Name:	Father's Name:										
Domicile	Nationality										
Present Address:											
	Permanent Address: Cell No.: Date of Birth Place of E										
Date of Admission in 1st											
Medical College / Cate							<u> </u>				
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				llege			4 th Year Final Year				
	1 st Year		2 nd Year		3 rd Year		4 th Year		9 th 10 th		
MDDO	Semester	Semester	Semester	Semester	Semester	Semester	Semester	Semester	Semester	Semester	
MBBS Examination											
Annual / Retake / Supplementary Examination											
Examination of											
Held in the Year											
Seat No.											
Total Marks											
Result											
Clearance Certificate	from the f	following	sections ar	re attache	d herewitl	h:	Descripio	nal Certifica	oto No		
1) Clearance from College Lib	orary:	Signa	ture	Stamp							
2) Hostel Warden: Not Availed Signature Stamp							Date Sessions				
3) Hostel Accountant Fee C	leared:(All fee vouche	ers attached) Signa	ture	Stamp			Annual /	Supply of 2	20		
4) Accounts Branch DMC:SignatureStamp							1st Year Roll No.				
5) Paid fee vouchers attached	(photocopy)			YES	S NO	0	Date of Admission				
6) College identity Card (Orig	inal Return) at	tached with f	orm:	YES	S NO	0	Date of Graduation				
7) Photograph one (Pasted on					S NO	0	01	_			
8) Employment Exchange Cer											
student should attach valid						0	_	`andidata'	c Cianat		
9) Enrolment Card (Attached						0		Candidate'	s signati	ai e	
10) All Mark sheets pass & fai	ıı required			YES	S NO	0					

NO

Receiver's Signature

11) Grade Book: (Photocopy) ______YES



DOW UNIVERSITY OF HEALTH SCIENCES SINDH MEDICAL COLLEGE, KARACHI



To, The Principal

Photograph Sindh Medical College, JSMU **Please Paste** Form No. Karachi. Don't Staple Receiving S. No. Subject: ISSUANCE OF PROVISIONAL CERTIFICATE Enrolment # DUHS/D/ ___ I have passed my Final year MBBS Examination Annual / Scheduled of DUHS 2015 held in 2015 kindly issue me provisional certificate and obliged. My Particulars are given below: Father's Name: Name: Domicile ___ Nationality___ Present Address: Permanent Address: Cell No.: Date of Birth Place of Birth Phone (Res.): Date of Admission in 1st Year MBBS ______ Session: _____ Admit in which college__ Medical College / Category of Seat____ For Migration Case only He / She was admitted to this college on _____ 20 ____ in ____ year MBBS Class on Migration from Medical College 1st Year 2nd Year 3rd Year 4th Year **Final Year** Semester **MBBS** Examination Annual / Retake / Supplementary Examination Examination of Held in the Year Seat No. **Total Marks** Result Clearance Certificate from the following sections are attached herewith: Provisional Certificate No. ___ 1) Clearance from College Library: -----Signature___ ___ Sessions ___ 2) Hostel Warden: --- Not Availed Availed Signature Stamp_ Annual / Supply of 20_____ 3) Hostel Accountant -- Fee Cleared:(All fee vouchers attached) Signature___ 4) Accounts Branch DMC: _____Signature___ 1st Year Roll No. ____ 5) Paid fee vouchers attached (photocopy) ______ YES NO Date of Admission 6) College identity Card (Original Return) attached with form: YES NO Date of Graduation ___ NO 8) Employment Exchange Certificate from Pakistani only. Foreign National student should attach valid passport photocopy.____ YES NO Candidate's Signature 9) Enrolment Card (Attached with form & photocopy)......YES NO 10) All Mark sheets pass & fail required. ______YES NO

NO

Receiver's Signature



DOW UNIVERSITY OF HEALTH SCIENCES DOW INTERNATIONAL MEDICAL COLLEGE



To, The Principal

Photograph Dow International Medical College, DUHS **Please Paste** Form No. Karachi. Don't Staple Receiving S. No. Subject: ISSUANCE OF PROVISIONAL CERTIFICATE Enrolment # DUHS/D/ ____ I have passed my Final year MBBS Examination Annual / Scheduled of DUHS 2015 held in 2015 kindly issue me provisional certificate and obliged. My Particulars are given below: Father's Name: Name: Domicile ___ Nationality___ Present Address: Permanent Address: Cell No.: Date of Birth Place of Birth Phone (Res.): Date of Admission in 1st Year MBBS ______ Session: _____ Admit in which college__ Medical College / Category of Seat____ For Migration Case only He / She was admitted to this college on _____ 20 ____ in ____ year MBBS Class on Migration from Medical College 1st Year 2nd Year 3rd Year 4th Year **Final Year** 10th Semester **MBBS** Examination Annual / Retake / Supplementary Examination Examination of Held in the Year Seat No. **Total Marks** Result Clearance Certificate from the following sections are attached herewith: Provisional Certificate No. ___ 1) Clearance from College Library: -----Signature___ __ Sessions ___ 2) Hostel Warden: --- Not Availed Availed Signature Stamp_ Annual / Supply of 20_____ 3) Hostel Accountant -- Fee Cleared:(All fee vouchers attached) Signature___ 4) Accounts Branch DMC: _____Signature___ 1st Year Roll No. ____ 5) Paid fee vouchers attached (photocopy) ______ YES NO Date of Admission 6) College identity Card (Original Return) attached with form: YES NO Date of Graduation _ NO 8) Employment Exchange Certificate from Pakistani only. Foreign National student should attach valid passport photocopy.____ YES NO Candidate's Signature 9) Enrolment Card (Attached with form & photocopy)......YES NO 10) All Mark sheets pass & fail required. ______YES NO

NO

Receiver's Signature