



DOW UNIVERSITY OF HEALTH SCIENCES

DOW MEDICAL COLLEGE, KARACHI



To,
The Principal
Dow Medical College, DUHS
Karachi.

Form No. _____

Receiving S. No. _____

Enrolment # DUHS/D/ _____

Photograph
Please Paste
Don't Staple

Subject: ISSUANCE OF PROVISIONAL CERTIFICATE

Sir,
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:

Name: _____ Father's Name: _____

Domicile _____ Nationality _____

Present Address: _____

Permanent Address: _____

Phone (Res.): _____ Cell No.: _____ Date of Birth _____ Place of Birth _____

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 _____

	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
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:

- 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 DMC: ----- Signature _____ Stamp _____
- 5) Paid fee vouchers attached (photocopy) ----- YES NO
- 6) College identity Card (Original Return) attached with form: ----- YES NO
- 7) Photograph one (Pasted on Form) ----- YES NO
- 8) Employment Exchange Certificate from Pakistani only. Foreign National
student should attach valid passport photocopy. ----- YES NO
- 9) Enrolment Card (Attached with form & photocopy)..... YES NO
- 10) All Mark sheets pass & fail required. ----- YES NO
- 11) Grade Book: (Photocopy) ----- YES NO

Provisional Certificate No. _____

Date _____ Sessions _____

Annual / Supply of 20 _____

1st Year Roll No. _____

Date of Admission _____

Date of Graduation _____

Candidate's Signature

Receiver's Signature



DOW UNIVERSITY OF HEALTH SCIENCES SINDH MEDICAL COLLEGE, KARACHI



To,
The Principal
Sindh Medical College, JSMU
Karachi.

Form No. _____

Receiving S. No. _____

Enrolment # DUHS/D/ _____

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Date _____ Sessions _____

Annual / Supply of 20 _____

1st Year Roll No. _____

Date of Admission _____

Date of Graduation _____

Candidate's Signature

Receiver's Signature



DOW UNIVERSITY OF HEALTH SCIENCES

DOW INTERNATIONAL MEDICAL COLLEGE



To,
The Principal
Dow International Medical College, DUHS
Karachi.

Form No. _____

Receiving S. No. _____

Enrolment # DUHS/D/ _____

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