To,

The Principal, Dr. J.J. Magdum Homoeopathic Medical College, Jaysingpur

NAME IN Full (As per 12<sup>th</sup> Mark sheet) (CAPITAL LETTER):

For Office Use Only					
Admission Year					
Previously No.					
Latest No.					

Date:- / / 20

## Sub:- Regarding Leaving/Transfer/Migration Certificate

SURNAME																	
FIRST NAME															-		. Di
MIDDLE NAME															r	kecer	nt Photo
MOTHER'S NA	ME																
NAME IN DEVNAGARI (J	नराठीत)	I				l			ı	1	ı		1				
Date of ( As per 10 <sup>th</sup> Pas	sing Certif	icate)	PLA	ACE OF BIRTH GENDER (✓)				RELIGION CAS		CASTE							
(BB/WWW								MAL	E		FEM	ALE					
CATEGORY	OPEN	RE	SERVE	EV	VS	EI	ВС	SC	;	5	ST	Dī	Γ/VJ	NT	OE	зс	SBC
Tick Only (✓)																	
Address:-																	
City Name				Та	ıl.								Dist	-			
State				Pir	Coc	le					Em.			•			
Student Mobile No							Ţ	What	's a	pp	no						
		gree	BHMS Comple mmer/W		·)	Sea	ıt No	A	dm	ID iss	sion			ompleto Year ner/Win			Seat No
		•													•		
Reason of Leaving		Admission Cancel			Admission Transfer			Going for Higher Studies (if Yes kindly mention the details)									
(Mention Yes/No)																	
Course Name																	
College Address																	
Applied for Migration Certificate (if <u>Yes</u> Mention University Name)																	
Other Reason (Kindly Mention)																	

**DOCUMENT REQUIRED-**

SR. No.	DOCUMENT NAME	ATTACHED YES/NO
01	Leaving/Transfer/Migration Certificate Fee Receipt	
02	All Previous Year Mark sheet (Xerox)	
03	Passing Certificate (Xerox)	
04	Internship Complication Certificate (Xerox)	
05	College Leaving Certificate (12 <sup>th</sup> /BHMS Xerox)	
06	12 <sup>th</sup> Mark Sheet (Xerox)	
07	College/Course Selection Letter (Xerox)	

Dt-	/	/ 20	(Name-	Student Sign	)

## SECTIONAL REMARKS- (For Office Use Only)

The details pertaining to Admission, Passing and Cancellation etc. are verified & found true and correct, as mentioned-in above.

Dt-	/	/ 20	Student Section

## **OFFICE CLEARANCE-** (Stating Dues / No Dues, Remarks etc-)

Sr. No	Section / Dept.	Dues / No Dues	Remark, if any	Stamp & Signature
1	Cashier			
2	Scholarship Section			
3	Library-			

## APPROVAL -

Subjected ALLOWED / NOT ALLOWED-

ALLOWED / NOT ALLOWED-	
	PRINCIPAL

Note: -01. Leaving/Transfer Certificate Fee Rs. 150/- (For Single Copy)

- 02. Leaving/Transfer Certificate for Migration Fee Rs. 300/- (For Original + Duplicate Copy)
- 03. Certificate is issued between <u>05 days</u> (Working days) from the date of application submission.

For Office Use Only-

Leaving Certificate No	No of Copies	
Issue Date	Sign	
Date of received	Receivers Sign	