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Application for University Internship Completion Certificate (version 2019/03)

To:

Registrar

MGM Institute of Health Sciences, Navi Mumbai

Respected Sir,

I hereby request you to issue me a “**University Internship Completion Certificate**”.

My personal details are given below:

1) **Name of Candidate** : _____
(As mentioned in the final year/Last semester examination Mark Sheet)

2) **Mobile No:** _____ **Email ID:** _____

3) **Degree Title** : _____

4) **Month & Year of admission** :

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5) **P.R. No.** :

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6) **Name of College / School** : _____

7) **Month & Year of Passing** :

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8) **Internship Details**
Date of Starting Internship :

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Date of Internship Completion :

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Each of the following documents is mandatory and must be attached along with this application form otherwise application form will be rejected without any intimation.

- (i) College Internship Completion Certificate. (Original)
- (ii) Certificate showing details of Internship posting in various departments. (Original)
- (iii) Internship Performance Data Book (Original)
- (iv) HSC/12th Statement of Marks (Attested Photocopy)
- (v) Final year / Semester Statement of marks (Attested Photocopy).
- (vi) Pay Rs. 1500/- through ‘SBI Collect online payment portal link’ available on www.mgmuhs.com and attached e-receipt of SBI collect payment. **Please note that other mode of payment will not be accepted.**

Yours’ faithfully,

Date: / /20

Signature of Candidate

Checked By:.....

Forwarded By
(Dean/Director/Principal)

Date: / /20