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Application for University Internship Completion Certificate (version 2024/07)

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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- 9) **Appeared NEET PG:** Yes No
- If yes please provide following details:-
- NEET PG Year

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 Roll No. _____ Score/Marks: _____

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. (Self Attested Photocopy)
- (ii) University Passing Certificate (Self Attested Photocopy).
- (iii) Pay Rs. 1500/- through ‘Pay Online’ tab which is available at University website i.e. www.mgmuhs.com and click on “Other University Document fee”.
- (iv) **Please attach e-receipt of payment. Please note that other mode of payment will not be accepted.**

Date: / /20

[This application must be submitted directly to the University office]