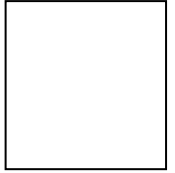


Intern Batch No. \_\_\_\_\_

Intern Roll No. \_\_\_\_\_



An application form of Completion of Internship for getting permission Final Registration from the Registrar, Veer Narmada South Gujarat University Surat. This form must be submitted through the Government Medical College Surat along with fixed fees decided by the Registrar, Veer Narmad South Gujarat University Surat.

SVSVSVSVSVSVSVSVSVSVSc

1	Full Name of Candidate (Beginning with Surname in Block letter)		<b>DR.</b>		
2	Full Postal Address of the Candidate With Pincode				
3	Name of College & Examination Centre		Government Medical College, Surat		
4	Date of Admission in College. (As per Caution Money)				
5	Month & Year of Third M.B.B.S. Passing.		3rd M.B.B.S. Part-I Exam.		
6	Seat No. of Third M.B.B.S. Passing.		3rd M.B.B.S. Part-I Exam.		
7	Month & Year of Third M.B.B.S. Passing		3rd M.B.B.S. Part-II Exam.		
8	Seat No. of Third M.B.B.S. Passing.		3rd M.B.B.S. Part-II Exam.		
9	Mobile No.		<b>+91</b>		
Sr. No	Centre of Internship	Period of Internship Training		<b>Subject</b>	Name of HOD or In charge HOD Training taken
		From	To		
Ref.: Dean, G.M.C., Surat's Internship Posting Order No. MCS/STU/INT-POST/					DATE: / /
01	New Civil Hospital Surat				
02	New Civil Hospital Surat				
03	New Civil Hospital Surat.				
04	New Civil Hospital Surat				
05	New Civil Hospital Surat				
06	New Civil Hospital Surat				
07	New Civil Hospital Surat				
08	New Civil Hospital Surat				
09	New Civil Hospital Surat				
10	New Civil Hospital Surat				
11	New Civil Hospital Surat				
12	New Civil Hospital Surat				
If Repeat Term of Internship Completed Dean, G.M.C., Surat's Repeat Internship Posting Order No. MCS/STU/INT-REPEAT/					Date:- / /
01	New Civil Hospital Surat				

Place:- Surat.

Date:-

Signature of Student: \_\_\_\_\_