LOCAM SENIOR RESIDENCE CANDIDATE FORM

GOVERNMENT MEDICAL COLLEGE, SURAT

Outside Majura Gate,Surat-395 001

Ca\$\$6.	> ↔ ०३४० ↔ ०३४० ↔ ० REPORT FOR	>>>>>> →>>>>> →>>>>> →>>>>> →>>>>> →>>>>>>		50 **
	<u>6</u>	MONTH ONLY	7	
	Date of Reporting for	joining :	•	
	Name :			
	Address:			
Out s				<u>Year</u>
	Student Mobile No.(1)		(2)	
	Home Mobile No.	Home	eLand Line No	
Sir,				
	I the undersigned here by report	t for Senior Residence (_) at your College,
	I submit herewith the following			
(1)	Subject:		eeDiplo	ma
(2) (3)	Date of Internship Completed Name of the University from which MBBS passed	:		
(4)	Name of State.			
	Following Docum	nents are attach wit	th the Admission	form
1.	-	ll Mark Sheets) 1st, 2		
2.	Attempt Certificate.			
3.	Internship Completion College & University.			
4.	Degree Certificate Provisional / Permanent			
5.	U.G. Registration			<u>.</u>
6.	P.G. Registration			<u>.</u>
7.	Cast Certificate If applicable.	SC / ST	Sub Cast :	
8.	S.E.B.C. Category Cast/Cert	ificate and New Year	Creymilyer Certifi	cate.
9.	Leaving Certificate. / Transfe	er Certificate.		
10.				
	I hereby undertake that the info	rmation given above an	nd documents submit	ted are correct.
	:-Surat. 		Yours Fai	thfully,
			(Signature of Ser	nior Resident)