## **REQUIREMENTS FOR MIGRATION**

- Application by student his/ her self along with valid reasons for migration addressed to Registrar, UHS.
- No Objection Certificate from the Head of <u>Accepting College/ Institution</u> clearly mentioning the availability of seat.
- 3. No Objection Certificate from the Head of Relieving College/Institution.
- 4. No Objection Certificate issued by relevant Regulatory Body i.e. PMDC, PNC etc.
- No Objection Certificate from the parent University, in case of Inter-University
   Migration.
- 6. Payment of prescribed migration fee.
- Detailed transcript/ academic record in case of Inter-University migrations on prescribed format (as given below).

## NOTE:

- Migration of undergraduate student will only be allowed after passing 1<sup>st</sup> Professional Examination (for MBBS program after 1<sup>st</sup> Prof. MBBS Part I & II in totality).
- No migration shall be allowed from a private Institution to a public Institution or from a
  public Institution to a private Institution.
- Mutual Migration of students shall not be allowed.
- Migration request of undergraduate students studying in final year of their respective courses shall not be entertained.
- The consent of Supervisors and Institutions concerned shall be required for migration of postgraduate students.

## **DETAILED TRANSCRIPT**

Name:					
Father	's Name:				
Name of College:					
	bed Curriculum & Scho	•	?		
migrati	ich cases, a certified con request.) ear MBBS / Title of Exa		rriculum is to be pro	ovided alongwith t	Number of Attempts
S#	Subjects	Credit /Study Hours Allocated	Credit /Study Hours Attended	Marks/Result	71000111
	-	Hours Anocated	Hours Attended		1
Total					
Second Year MBBS / Title of Examination					Number of Attempts
S#	Subjects	Credit /Study Hours Allocated	Credit /Study Hours Attended	Marks/Result	
Total					
Third Year MBBS / Title of Examination					Number of Attempts
S#	Subjects	Credit /Study Hours Allocated	Credit /Study Hours Attended	Marks/Result	
Total					_
Fourth Year MBBS / Title of Examination					Number of Attempts
Total					
i Utai					