

SRIMANTA SANKARADEVA UNIVERSITY OF HEALTH SCIENCES

Narakasur Hilltop, Bhangagarh, Guwahati, Assam Phone: 0361-2130431 (O) E-mail: ssuhs_assam@yahoo.in Website: www.ssuhs.in

Application for Eligibility for Registration of Ph.D.	Scholar Migration from other
University/Board/Coun	ncil

1. Name of the Student (in block letters)										
,			(letters) :							
			k letters) :	·						
4. Date of Birth				:Nationality						
5. Sex			:	:						
6. Home Addr	ess in full		:							
7. Details of E	examination	ıs passe	ed :							
Examinatio	n Passed	Name of University/ Board/ Council		Year of Passing		Exam. Roll Division/ No. Class		Name of School/College		llege
H.S.L.C										
H.S.S.L.C./Ed Examination	quivalent									
MBBS/BDS/BBHMS/B.Sc Others (Speci	. Nursing/									
MD/MS/MDS (Ayur)/ M.Sc Others (Speci	. Nursing/									
Any Other (S	pecify)									
8. Name of the 9. Cause of m 10. Particulars	igration to t	his Uni	iversity :		_	ted :				
Course	Enrolmen	t No.	Academic	Session	Nai	me & Designa	ation of Gu	ide	e Remarks	
Ph.D.										
I	declare that	t the pa				rue to the best be liable to a		vledge	and belief.	
Date:				Full Signature of the Applicant						
						E GUIDE/SU				
University/Bo as per regulati He/ She may	ard/Counci on in the ac be grante	l satisfi cademic d Eligi	es all the recessionbility for Re	uirement	s for	admission to	the		a student of S	. course
Sankaradeva U	Jniversity o	of Healt	th Sciences.							
Memo No Date				Signature of the Guide/Supervisor With Office Seal						
Particulars ver								n may/r	nay not be allo	wed.

Dealing Asstt.

INSTRUCTIONS

Copies to be enclosed:

- 1. Migration Certificate (in Original). (The candidate should keep a Photostat copy of Migration Certificate for Personal record).
- 2. Photocopy of Mark Sheet of the last Examination.