Dr. Y.S.R.UNIVERSITY OF HEALTH SCIENCES, ANDHRA PRADESH VIJAYAWADA-520008

No format other than this shall be used. Please read the instructions given in pages 3 & 4 before filling up. This application form may be down loaded by candidates through YSR UHS Website: http://ntruhs.ap.nic.in

APPLICATION FOR ISSUE OF PROVISIONAL CERTIFICATE

(This is the prescribed Application Form for obtaining PROVISIONAL DEGREE CERTIFICATE to be filled up and to be submitted to this University through the Principal of the concerned college, by all those candidates who have passed their Super Specialty Degree Examinations between the last and Forthcoming Annual Convocation only).

|) | Full Name of the Candidate : | | | | | |
|----|---|--|--|--|--|--|
| 2) | Surname of the Candidate : | | | | | |
| 3) | Name of Father / Mother of the Candidate: | | | | | |
| ł) | a) Provisional Certificate applied for | r: | | | | |
| | b) Month and Year of Passing | : | | | | |
| | c) Registered No. /Hall Ticket No : | | | | | |
| | d) College where Studied and Passed the Degree Course / Examinations: | | | | | |
| 5) | Details of fee paid: a) Amount : Rs | b) DD No: Dated : | | | | |
| | c) Name of the Bank : | e) Place of the Bank : | | | | |
|) | address (with PIN Code, Telephone No. Cell Phone No.): | | | | | |
| | Station : Date : | (Signature of the Applicant) | | | | |
| | FOR THE USE | OF Dr. YSR UHS EXAMINATIONS WING ONLY | | | | |
| | TR Page No : PC No | | | | | |
| | Submitted: | | | | | |
| | All the above details hav Hence, the Provisional Degree Cert | e been verified. DD / Pay Order has been sent to the Finance Wing ificate may be issued. | | | | |

| Jr.Asst. | Sr.Asst. | Supdt. | Asst. Registrar (Exams) | Deputy Registrar (Exams) |
|----------|----------|--------|-------------------------|--------------------------|
| | | | | |

FOR THE USE OF PRINCIPAL'S OFFICE ONLY

| 1) | Certified that the applicant, Dr has completed the study period well before the exams were held /has completed the study period on by attanding closes and words even after the average are over | | | |
|----------|--|--|--|--|
| 2) | by attending classes and wards even after the exams are over. 2) Certified that the applicant has no dues to the college. Hence, the Registrar, YSR University of Health Sciences is requested to issue the Provisional Degree Certificate as per the details furnished by the applicant from Serial No.1 to 6 of this application form. | | | |
| | (Please delete the inappropriate wording in Certification I above) | | | |
| Station: | | | | |
| Date : | (Signature of the Principal with office seal) | | | |
| | | | | |
| | | | | |

INSTUCTIONS & GUIDELINES TO THE APPLICANT

- 1) Use only capital Letters.
- 2) All applications must be routed through the Principal of the College where the applicant has studied and passed the PG Degree / Diploma / Super Specialty Degree Examination.
- 3) <u>Column No.1 & 2 of the application form : Full Name & Surname of the candidate:</u>
 - a) It should be written strictly as spelt in the UG Degree Certificate only.
 - b) In case of those who want to obtain the PG Degree / PG Diploma / Super Specialty Degree Provisional Certificate as per the changed Name / changed Surname, the Full changed Name must be written as spelt in the AP Gazette / Proceedings of the YSR University of Health Sciences / Proceedings of the Director of Medical Education, Andhra Pradesh / Proceedings of the Director of Health, Andhra Pradesh OR any other Educational Authority.
- 4) <u>Column No.3 of the application form : Name of the Father / Mother :</u> It should be filled up only by those who are applying for issue of the Super Specialty Degree Provisional Certificate only.
- 5) <u>Column No. 4 (a) of the application form: Provisional Degree Certificate applied for:</u> Please specify whether applying for issue of DM / M.Ch. Degree Provisional Certificate. Also, please specify within brackets the concerned specialty of the Faculty, without fail.
- 6) <u>Column No.5 of the application form: Details of fee:</u>
 - a) DD/Pay Order for Rs. 500/- is to be taken from any Nationalized Bank, payable at Vijayawada, in favour of **THE REGISTRAR**, **YSR UNIVERSITY OF HEALTH SCIENCES**, **VIJAYAWADA**.
- 7) <u>Column No.6 of the application form: Full Address:</u> This is required by YSRUHS to get certain doubts etc. if any, cleared from the applicant before or after issuing the Provisional Degree Certificate.

ENCLOSURES:

The following documents are to be enclosed to the application form securely tagged, in the order specified.

- 1) Copy of the Hall Ticket of the Super Specialty Degree Examination.
- 2) Attested copy of PG Permanent Degree Certificate.

Note:

- 1) Without the copy of the Hall Ticket, Provisional Certificate cannot be issued personally. (Photograph on the Hall Ticket will help to recognize the actual candidate)
- 2) Provisional Certificate cannot be handed over to others but will be sent to the applicant by post.

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