

DOW UNIVERSITY OF HEALTH SCIENCES

Baba-e-Urdu Road, Karachi, Pakistan &99204776 Facsimile992013 72 Website: www.duhs.edu.pk

Ref. No.

Dated: ____

Controller

Examination Department Dow University of Health Sciences Karachi

APPLICATION FOR PROVISIONAL CERTIFICATE

(To be submitted to Director Research through the Head of the Department.)

I hereby apply for provisional certificate for____

(Degree) the requirements for which I have successfully completed.

The clearance forms from various sectional / departmental heads have been obtained.

(Signature.) (Name of Candidate) 1. **Enrollment Card** a. Enrolment Extension/Re-Admission (If Applicable) 2. DUHS-GAT / NTS-GAT/GRE Result 3. Transcripts of all semester exams (Certified by departmental Head) 4. **Comprehensive Exam Result** (only for MBA / EMBA / MHPE / PhD) 5. Fee Certificate (Issue by Fee Section, Head Office) a. Research Project/Thesis Evaluation Fee 6. BASR Project/Thesis Approval Letter 7. **Original RF ID Card** (Required After having BASR Approval Letter) 8. **Published Original Article** (Only for PhD) 9. Departmental Clearance (Departmental Head) a) Liabilities b) Return of Equipment c) Departmental Library **10.** Central Library (Ojha Campus) 11. Animal House 12. DDRL 13. DRIBBS **14.** Dow Radiology for office use

Provisional Certificate be issued as per rules.

Secretary, Board of Advanced Studies & Research Dow University of Health Sciences, Karachi Most Recent Four Passport Size Photograph



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Dated:

The Chairman

Board of Advanced Studies & Research Dow University of Health Sciences Karachi

CLEARANCE FORM (For Project)

MPH / MSPH / MSN / MSAPT/ MSBE / MS-TMTT / MSc. DS / MSc. D&E

(To be submitted to Director Research through the Head of the Department.)

I hereby submit one hard copy and a soft copy of my Project with plagiarism report entitled

	for
	(degree) examination written on the conclusion of research
supervised by	(Supervisor). I request
that my projec	t evaluation may please be process.

The clearance from various sectional / departmental heads has also been obtained.

(Signature.)

	-	(Name of Candidate)
1.	Enrollment Card a. Enrolment Extension/Re-Admission (If Applicable)_	
2.	NTS-GAT / DUHS-GAT/GRE	
3.	Transcripts of all semester exams (Certified by departmental Head)	
4.	Fee Certificate (Issue by Fee Section, Head Office)	
5.	Research Project Evaluation Fee	
6.	Synopsis Approval Letter from IRC/IRB	
7.	Departmental Clearance (Departmental Head) a) Liabilities b) Return of Equipment c) Departmental Library	
8.	Central Library	
9.	Animal House	
10.	DDRL	
11.	DRIBBS	
12.	Dow Radiology	



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CERTIFICATE OF RELEASE FROM THE BOND

(Name of the Candidate)

is hereby released from the bond to serve the university after successful completion of

(Name of the Program)

Reason for release:

- 1. Bond is not applicable (Private candidate)
- 2. Bond has been completed as per university requirement
- 3. Bond money has been deposited with the finance department

Details of deposition bond money

Pay order Number______, Dated _____

draw on _____

(Name of the Bank and Branch)

amount		(
_	(in figures)	(in words)

Attach copy of Pay Order and Vouchers submitted to UBL Baba e Urdu Road Branch.

Signature

1. Director Finance

2. Registrar DUHS

_____)

Stamp:

Date:



DOW UNIVERSITY OF HEALTH SCIENCES SCHOOL OF POSTGRADUATE STUDIES

Ref. No. _

Dated:

(Revised)

CERTIFICATE OF NO DISCIPLINARY ACTION

It is hereby certified that no disciplinary action by the University is pending against

Who is a candidate of _____

of session _____

Signature & Seal Program Director,

Signature & Seal **Principal,** School of Postgraduate Studies, Dow University of Health Sciences, Karachi.

Signature & Seal Registrar, Dow University of Health Sciences, Karachi.