



# **SCHOOL OF POSTGRADUATE STUDIES**

## **DOW UNIVERSITY OF HEALTH SCIENCES**

Date \_\_\_\_\_

### **ROTATION APPLICATION**

Dr \_\_\_\_\_ S/o D/o \_\_\_\_\_ FCPS / MCPS

trainee of \_\_\_\_\_ at \_\_\_\_\_ wants to do rotation

in the \_\_\_\_\_ department at \_\_\_\_\_ Karachi

from \_\_\_\_\_ to \_\_\_\_\_.

Kindly allow the rotation and issue me a letter.

Remarks / Comments for the HOD / Supervisor \_\_\_\_\_

\_\_\_\_\_  
Parent HOD / Supervisor with stamp

\_\_\_\_\_  
Rotation HOD / Supervisor with stamp

\_\_\_\_\_  
Program Coordinator  
School of Postgraduate Studies  
DUHS Karachi