

Rajiv Gandhi University of Health Sciences, Karnataka

4th 'T' Block, Jayanagar, Bangalore- 560 041

APPLICATION FOR MIGRATION TRANSFER.

1	Name of the candidates as in the latest marks card (in BLOCK LETTERS)	*
2	Correspondence address in BLOCK LETTERS	
3	Course of study	
4	Register Number of this University	
5	Self-attested Photocopies of all marks cards received after admission to the course	
6	Name and address of the college where the student is studying	
7	Name and address of the college where the student is seeking to get transferred	
8	Reasons for seeking transfer (Enclose self-attested photocopies of supporting documents)	
9	(Remarks from the Principal of the college where the student is studying) A)Is the migration transfer is as per the norms prescribed by the University and Apex body?	Yes/No
10	B)Recommended/ Not Recommended Name of the Principal: Contact Number:	Signature ::
	email address:	Office seal:
11	(Remarks from the Principal of the college where the student is to be transferred) A)Details about the admission in the concerned batch where the student is seeking to migrate	Intake capacity: Present strength: Vacancy:
12	B)Whether the migration transfer is as per the norms prescribed by the University and Apex body	Yes/ No
13	C)Recommended/ Not Recommended Name of the Principal: Contact Number:	Signature ::
1.4	email address:	Office seal:
14	Details of fee paid through on line payment gateway in the university web site	Transaction ID: Amount:
	(Self attested photocopy of receipt)	Date:
15	Date:	Signature of the candidate:
		Contact Number;
	Place:	Email address:

<u>Note:</u> Principals are requested to get themselves acquainted with existing norms that govern migration transfer of University and the concerned apex body and state clearly whether the applicant is recommended to be considered for migration transfer or otherwise on the basis of the same. If the applicant is not recommended for any other reason, the same may be stated.