



# ATAL BIHARI VAJPAYEE PARAMEDICAL AND HEALTH SCIENCE

Website : [www.atalbvphs.com](http://www.atalbvphs.com) Helpline : 9458506929

## APPLICATION FOR MIGRATION CERTIFICATE

|                     |
|---------------------|
| Course Applied for: |
|                     |

Name of Student-----

Enrollment No. -----Roll No. -----

Father's Name-----

Mother's Name -----

Name of Institution -----

Choice for delivery of migration certificate                      College                       Residence

Year of Degree completion: ----- Left out year -----

Payment details:-Challan/DD/Online recp. No.-----Date -----Name of Bank -----

Amount **Rs. 500/-**

Check List :

1. Photo copy of consolidated mark sheet & Provisional degree certificate
2. Demand Draft of Rs.500/-
3. Photo copy of personal ID
4. Photo copy of residence proof (if delivered at residence)

Home address-----

Mobile No. .... E-mail ID.....

|              |  |
|--------------|--|
| Date: -..... | <b>Signature of Student with full Name</b> |
|--------------|--|

(for office us only)

Reference no. .... Date..... Dispatch no. .... Date.....