

Application for Transcript Certificate (Version 2026/03)

To:
Director
MGM School of Biomedical Sciences
Kamothe, Navi Mumbai – 410 209

Respected Sir/Madam,

I firmly request you to issue me a “**Transcript Certificate**” as early as possible. My personal details are given below:

- 1) Name of Candidate :
(As mentioned in the final year/Last semester examination Mark Sheet OR Degree Certificate)
- 2) Father's Full Name :
- 3) Mother's Full Name :
- 4) Email ID: Mobile No:
- 5) Address:
.....
- 6) Date of Birth : / /
- 7) Month & Year of Admission : /
- 8) Month & Year of Completion of Course : /
- 9) P. R. No :
- 10) Name of College / School :
- 11) Program Name :
- 12) Last exam held in :
- 13) Internship Start Date : / / End Date : / /
- 14) Purpose of Application :

Each of the following documents are mandatory and must be attached along with this application form otherwise application form will be rejected without any intimation.

- (i) All Statement of marks (including fail marksheet) (Attested Photocopy).
- (ii) Degree / Passing Certificate. (Attested Photocopy)
- (iii) 12th Leaving Certificate (Attested Photocopy) for Bachelor applicant
- (iv) Bachelor Leaving Certificate (Attested Photocopy) for Master applicant
- (v) Birth Certificate (Attested Photocopy)
- (vi) Pay Rs. 5000/- for Bachelor program and Rs.10000/- for Master program through “SBI Collect” online payment portal under “MGM School of Biomedical Sciences, Navi Mumbai- Miscellaneous receipt.” link is <https://onlinesbi.sbi.bank.in/sbicollect/>
Please not that other mode of payment will not be accepted.

Thanking you,

Yours' faithfully,

Date:/...../20

Signature of Student

Approved By
Director)

Date: / /20