

Application for Transfer 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 “**Transfer 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) Cast & Sub Cast : Nationality :
- 7) Date of Birth : / /
- 8) Place of Birth :
- 9) Month & Year of Admission : /
- 10) Month & Year of Completion of Course : /
- 11) P. R. No :
- 12) Name of College / School :
- 13) Program Name :
- 14) Last exam held in :
- 15) Internship Start Date : / / End Date : / /
- 16) Last Secondary School & College :
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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) Final year / Semester Statement of Marks. (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) Cast Certificate (Attested Photocopy)
- (vi) Birth Certificate (Attested Photocopy)
- (vii) Pay Rs. 1000/- 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