

Ref No.: DUHS/EXM/2024-830

NOTIFICATION

It is notified for information to the <u>concerned candidates</u> of constituent institute of Dow University of Health Sciences, that the Examination Form & Fee of <u>DIP CARD</u> <u>NICVD/DUHS First Year Retake Examination 2024 (BATCH-11)</u> will be accepted as following up to: <u>11th May</u>, <u>2024</u> in the office of the respective college.

EXAMINATION FEE: Rs: 20,000/-

IMPORTANT INSTRUCTIONS

The respective college will receive the forms, paid fee voucher & required documents from the eligible candidates and will submit to the Examinations Department, Dow University of Health Sciences within **three days** with a list of candidates completing the required formalities. The Payment Voucher of Examination Fee of each candidate may be enclosed with the forms of the respective candidates. The following documents are required to be attached:

- 1. Photocopy of the Enrolment Card (Both Sides).
- 2. Photocopy of the College Identity Card.
- 3. Original Fee Payment Voucher.
- 4. Paid tuition fee voucher copy mush be attached.
- 5. Any Other relevant document/ information can be asked to submit in addition to above.

Dated: 20-04-2024

C.c to:

- 1. The Staff Officer to the Vice-Chancellor, DUHS.
- 2. The P.A to Pro-Vice-Chancellor, DUHS.
- 3. The P.A to Registrar, DUHS.
- 4. The Director Finance, DUHS.
- 5. The Project Director, Dow University of Health Sciences.
- 6. The principle, School of Post Graduate Studies, DUHS.
- 7. The Program Director, DIP CARD, NICVD/DUHS.
- 8. The Director, CMS, DUHS.
- 9. The Web Manager, DUHS.
- 10. All Concerned.



Ref No.: DUHS/EXM/2024-832

NOTIFICATION

It is notified for information to the <u>concerned candidates</u> of constituent institute of Dow University of Health Sciences, that the Examination Form & Fee of <u>DIP CARD NICVD</u>

<u>Second Year Examination 2024 (BATCH- 11)</u> will be accepted as following up to:

EXAMINATION FEE: RS: 20,000/-

IMPORTANT INSTRUCTIONS

The respective college will receive the forms, paid fee voucher & required documents from the eligible candidates and will submit to the Examinations Department, Dow University of Health Sciences within **three days** with a list of candidates completing the required formalities. The Payment Voucher of Examination Fee of each candidate may be enclosed with the forms of the respective candidates. The following documents are required to be attached:

1. Photocopy of the Enrolment Card (Both Sides).

11th May, 2024 in the office of the respective college.

- 2. Photocopy of the College Identity Card.
- 3. Original Fee Payment Voucher.
- 4. Paid tuition fee voucher copy mush be attached.
- 5. Any Other relevant document/information can be asked to submit in addition to above.

Dated: 20-04-2024

C.c to:

- 1. The Staff Officer to the Vice-Chancellor, DUHS.
- 2. The P.A to Pro-Vice-Chancellor, DUHS.
- 3. The P.A to Registrar, DUHS.
- 4. The Director Finance, DUHS.
- 5. The Project Director, Dow University of Health Sciences.
- 6. The principle, School of Post Graduate Studies, DUHS.
- 7. The Program Director, DIP CARD, NICVD.
- 8. The Director, CMS, DUHS.
- 9. The Web Manager, DUHS.
- 10. All Concerned.



Ref No.: DUHS/EXM/2024-831

NOTIFICATION

It is notified for information to the <u>concerned candidates</u> of constituent institute of Dow University of Health Sciences, that the Examination Form & Fee of <u>DIP CARD NICVD</u>

<u>Second Year Retake Examination 2024 (BATCH- 10)</u> will be accepted as following up to:

<u>11th May, 2024</u> in the office of the respective college.

EXAMINATION FEE: RS: 20,000/-

IMPORTANT INSTRUCTIONS

The respective college will receive the forms, paid fee voucher & required documents from the eligible candidates and will submit to the Examinations Department, Dow University of Health Sciences within **three days** with a list of candidates completing the required formalities. The Payment Voucher of Examination Fee of each candidate may be enclosed with the forms of the respective candidates. The following documents are required to be attached:

- 1. Photocopy of the Enrolment Card (Both Sides).
- 2. Photocopy of the College Identity Card.
- 3. Original Fee Payment Voucher.
- 4. Paid tuition fee voucher copy mush be attached.
- 5. Any Other relevant document/information can be asked to submit in addition to above.

Dated: 20-04-2024

C.c to:

- 1. The Staff Officer to the Vice-Chancellor, DUHS.
- 2. The P.A to Pro-Vice-Chancellor, DUHS.
- 3. The P.A to Registrar, DUHS.
- 4. The Director Finance, DUHS.
- 5. The Project Director, Dow University of Health Sciences.
- 6. The principle, School of Post Graduate Studies, DUHS.
- 7. The Program Director, DIP CARD, NICVD.
- 8. The Director, CMS, DUHS.
- 9. The Web Manager, DUHS.
- 10. All Concerned.



Ref No.: DUHS/EXM/2024-833

NOTIFICATION

It is notified for information to the <u>concerned candidates</u> of constituent institute of Dow University of Health Sciences, that the Examination Form & Fee of <u>DLO First Year Retake</u> <u>Examination 2024 (BATCH- 11)</u> will be accepted as following up to: <u>11th May, 2024</u> in the office of the respective college.

EXAMINATION FEE: Rs: 20,000/-

IMPORTANT INSTRUCTIONS

The respective college will receive the forms, paid fee voucher & required documents from the eligible candidates and will submit to the Examinations Department, Dow University of Health Sciences within **three days** with a list of candidates completing the required formalities. The Payment Voucher of Examination Fee of each candidate may be enclosed with the forms of the respective candidates. The following documents are required to be attached:

- 1. Photocopy of the Enrolment Card (Both Sides).
- 2. Photocopy of the College Identity Card.
- 3. Original Fee Payment Voucher.
- 4. Paid tuition fee voucher copy mush be attached.
- 5. Any Other relevant document/ information can be asked to submit in addition to above.

Dated: 20-04-2024

C.c to:

- 1. The Staff Officer to the Vice-Chancellor, DUHS.
- 2. The P.A to Pro-Vice-Chancellor, DUHS.
- 3. The P.A to Registrar, DUHS.
- 4. The Director Finance, DUHS.
- 5. The Project Director, Dow University of Health Sciences.
- 6. The principle, School of Post Graduate Studies, DUHS.
- 7. The Program Director, DLO, DUHS.
- 8. The Director, CMS, DUHS.
- 9. The Web Manager, DUHS.
- 10. All Concerned.



Ref No.: DUHS/EXM/2024-827

NOTIFICATION

It is notified for information to the <u>concerned candidates</u> of constituent institute of Dow University of Health Sciences, that the Examination Form & Fee of <u>DMJ First Year Retake</u> <u>Examination 2024 (BATCH- 11)</u> will be accepted as following up to: <u>11th May, 2024</u> in the office of the respective college.

EXAMINATION FEE: RS: 20,000/-

IMPORTANT INSTRUCTIONS

The respective college will receive the forms, paid fee voucher & required documents from the eligible candidates and will submit to the Examinations Department, Dow University of Health Sciences within **three days** with a list of candidates completing the required formalities. The Payment Voucher of Examination Fee of each candidate may be enclosed with the forms of the respective candidates. The following documents are required to be attached:

- 1. Photocopy of the Enrolment Card (Both Sides).
- 2. Photocopy of the College Identity Card.
- 3. Original Fee Payment Voucher.
- 4. Paid tuition fee voucher copy mush be attached.
- 5. Any Other relevant document/information can be asked to submit in addition to above.

Dated: 20-04-2024

C.c to:

- 1. The Staff Officer to the Vice-Chancellor, DUHS.
- 2. The P.A to Pro-Vice-Chancellor, DUHS.
- 3. The P.A to Registrar, DUHS.
- 4. The Director Finance, DUHS.
- 5. The Project Director, Dow University of Health Sciences.
- 6. The principle, School of Post Graduate Studies, DUHS.
- 7. The Program Director, DMJ, DUHS.
- 8. The Director, CMS, DUHS.
- 9. The Web Manager, DUHS.
- 10. All Concerned.



Ref No.: DUHS/EXM/2024-828

NOTIFICATION

It is notified for information to the <u>concerned candidates</u> of constituent institute of Dow University of Health Sciences, that the Examination Form & Fee of <u>DMRD Second Year</u> <u>Examination 2024 (BATCH- 11)</u> will be accepted as following up to: <u>11th May, 2024</u> in the office of the respective college.

EXAMINATION FEE: Rs: 20,000/-

IMPORTANT INSTRUCTIONS

The respective college will receive the forms, paid fee voucher & required documents from the eligible candidates and will submit to the Examinations Department, Dow University of Health Sciences within **three days** with a list of candidates completing the required formalities. The Payment Voucher of Examination Fee of each candidate may be enclosed with the forms of the respective candidates. The following documents are required to be attached:

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- 2. Photocopy of the College Identity Card.
- 3. Original Fee Payment Voucher.
- 4. Paid tuition fee voucher copy mush be attached.
- 5. Any Other relevant document/ information can be asked to submit in addition to above.

Dated: 20-04-2024

C.c to:

- 1. The Staff Officer to the Vice-Chancellor, DUHS.
- 2. The P.A to Pro-Vice-Chancellor, DUHS.
- 3. The P.A to Registrar, DUHS.
- 4. The Director Finance, DUHS.
- 5. The Project Director, Dow University of Health Sciences.
- 6. The principle, School of Post Graduate Studies, DUHS.
- 7. The Program Director, DMRD, DUHS.
- 8. The Director, CMS, DUHS.
- 9. The Web Manager, DUHS.
- 10. All Concerned.



Ref No.: DUHS/EXM/2024-829

NOTIFICATION

It is notified for information to the <u>concerned candidates</u> of constituent institute of Dow University of Health Sciences, that the Examination Form & Fee of <u>DTCD Second Year</u>

<u>Examination 2024 (BATCH- 11)</u> will be accepted as following up to: <u>11th May, 2024</u> in the office of the respective college.

EXAMINATION FEE: Rs: 20,000/-

IMPORTANT INSTRUCTIONS

The respective college will receive the forms, paid fee voucher & required documents from the eligible candidates and will submit to the Examinations Department, Dow University of Health Sciences within **three days** with a list of candidates completing the required formalities. The Payment Voucher of Examination Fee of each candidate may be enclosed with the forms of the respective candidates. The following documents are required to be attached:

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- 5. Any Other relevant document/information can be asked to submit in addition to above.

Dated: 20-04-2024

C.c to:

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- 2. The P.A to Pro-Vice-Chancellor, DUHS.
- 3. The P.A to Registrar, DUHS.
- 4. The Director Finance, DUHS.
- 5. The Project Director, Dow University of Health Sciences.
- 6. The principle, School of Post Graduate Studies, DUHS.
- 7. The Program Director, DTCD, DUHS.
- 8. The Director, CMS, DUHS.
- 9. The Web Manager, DUHS.
- 10. All Concerned.