

KERALA UNIVERSITY OF HEALTH SCIENCES

THRISSUR -680596

APPLICATION FOR CRI TRANSFER

Complete each item. Incomplete form will not be processed.

1. Name of the student :
2. Register No. :
3. Address of the student :
4. Contact Number :
5. Email ID :
6. Name of Course :
7. Name of the college currently studying :
8. Month and year of passing the qualifying examination :
9. Institution/College to which CRI transfer is required :

10. Details of Temporary Council Registration:

- Registration No :
- Date of registration :
- Sl.No and date :
- Date of expiry :

11. Reason for College transfer :

- a. If the reason is due to medical condition, details:

12. Online payment details * :

- Amount :
- E- challan No :

(*Note: Fee once remitted will not be refunded under any circumstances)

13. Whether all enclosures listed are attached**: Yes/No

(**Application without any of the enclosures will not be considered)

Declaration

I _____ do hereby declare that the information given above is true to the best of my knowledge and belief. I am aware of the fact that if the information given by me is proved to be false at any point of time, the transfer obtained by me is liable to be cancelled and the university is empowered to take appropriate action against me as per the relevant provisions in force.

Place :

Date :

Name and signature of the applicant

List of enclosures:

1. NOC in original from the college of study
2. NOC in original from the institution to which CRRI is requested.
3. Certificate from the College of study (format is given below) that the CRI application is within the 5% limit.
4. NOC in original from respective statutory Council.
5. Self-Attested copy of the provisional Degree Certificate.
6. Self-Attested copy of the provisional registration certificate from the apex council.
7. Online fee Remittance Acknowledgement.

Address to which the Application along with enclosures to be sent:

The Registrar
Kerala University of Health Sciences,
Medical College P.O.,
Thrissur – 680 596.

Certificate

This is to certify that the CRI application of Sri/Smt..... is within the 5% of the total sanctioned intake of the college during the current academic year.

Place:

Date :

Principal