

GUJARAT AYURVED UNIVERSITY, JAMNAGAR

ACCREDITED GRADE "A" BY NAAC (CGPA 3.28)

College Record

Name of the Applicant :

Name of College :

Date of Joining in College :

Date of Leaving from College :

Name of Degree / Diploma / PG course studies at above college. :

B. A. M. S. / MD/MS(Ayu.) / D.Pharm / B.Pharm / M.Pharm / M.Sc. / BYNS / PG.DYNS First Professional Year
Seat No. -

Period in Which Subject was taken		Name of Subject Studied	No. of Months Taken	Hours per week		Details of marks / Grade		
From	To			Lecture	Practical	Max.	Min.	Obtained
RESULT : PASS / FAIL / ATKT			TOTAL					

B. A. M. S. / MD/MS(Ayu.) / D.Pharm / B.Pharm / M.Pharm / M.Sc. / BYNS / PG.DYNS Second Professional Year
Seat No. -

Period in Which Subject was taken		Name of Subject Studied	No. of Months Taken	Hours per week		Details of marks / Grade		
From	To			Lecture	Practical	Max.	Min.	Obtained
RESULT : PASS / FAIL / ATKT			TOTAL					

**B. A. M. S. / MD/MS(Ayu.) / D.Pharm / B.Pharm / M.Pharm / M.Sc. / BYNS / PG.DYNS Third Professional Year
Seat No. -**

Period in Which Subject was taken		Name of Subject Studied	No. of Months Taken	Hours per week		Details of marks / Grade		
				Lecture	Practical	Max.	Min.	Obtained
From	To				Clinic			
RESULT : PASS / FAIL / ATKT			TOTAL					

This is to Certified that _____ has completed one year internship
from _____ to _____ at _____ College / Hospital.

We have checked above information from our College record and it is true from best of my Knowledge.

College Seal

**Signature of the Principal /
Head of the Institute with Stamp**

**Registrar
Gujarat Ayurved University
JAMNAGAR**