IOINING REPORT

To The Dean/Principal/Director College/Institution: Delhi 1100 Sub.: Admission to Course ————— Post-graduate (Ayurveda/Unani/Homoeopathy)
_____ at _____ for the Session-2024. Sir/Madam, Please refer to the Provisional Admission cum Fees Slip vide transaction ID _____ regarding my provisional admission to ______ college. I have read the Rules, Regulations and Ordinances relating to the above course. I agree to pursue the above course as a regular whole-time student for the duration of the course and have already paid the University fees for 1st year amounting to Rs. 15,900/-*, as per details given above. I have joined the above course on (date) _____ in the Department of _____ at _____ at _____ College/ Hospital/ Institute. I submit myself to the disciplinary jurisdiction of the Vice-Chancellor and the several authorities of the University who may be vested with the authority to exercise discipline under the Act, the Statutes, the Ordinances and the rules that have been framed by the University from time to time in this behalf. The Fee mentioned above is under review and may change. Notice in this regard will be made available on the https://fmsc.du.ac.in/ Yours faithfully, (Signature of the Candidate) Dr. (Ms/Mr.) _____ Address: Phone no.: _____ Mobile no.: Date: Certified that the above candidate has joined the Department of _____ in ______ College/Institute/Hospital as a WHOLE TIME REGULAR student of ______ course on _____ (date).

Head of the Department (Seal)

Principal/Dean/Med. Supdt./Director (Seal)