



STUDENT'S REQUISITION FORM FOR APPLYING INTERNSHIP WITHIN UAE

[THROUGH CME DEPARTMENT/MEDICAL PRACTICE & LICENSE/MINISTRY OF HEALTH/UAE]

Date: ___/___/20___

To

The Dean-RAKCODS

Dear Sir,

I Mr./Ms. _____,
_____ national, holding Passport/UAE ID No. _____ registered in
the 20___-20___ batch and having completed all the requirements to be eligible for
receiving the BDS Degree Certificate in September 20___ from RAK Medical & Health
Sciences University, submit the following documents in order to avail 'Internship' approval
for the year 20___-20___ from the appropriate authorities.

Documents [complete and updated] enclosed are:

1. Request letter addressed to the Director of CME Department mentioning the following:
 - 1.1 Place of training [*provide choice of three emirates in preferred order*]
 - 1.2 Duration of the training period required [*mention 'twelve months'*]
 - 1.3 Type of Training [*mention 'Internship'*]
 - 1.4 Contact Details [*provide Mobile/Tel/Fax Nos. / E-mail ID*]
2. Copy of Passport [*validity: at least six months*]
3. Copy of UAE Residence Visa [*validity: at least six months; visit visa NOT eligible*].
4. Attested copy of the Provisional BDS Degree Certificate [*Attested by the Ministry of Foreign Affairs, UAE & Ministry of Higher Education & Scientific Research, UAE*]
5. Detailed Curriculum Vita [*required for fresh graduates as well, detailing experiences, if any, mentioning nature of work, place of work in chronological order*]
6. Copy of Birth Certificate
7. Copy of UAE National Identity Card [*expired ID card is NOT eligible*].

Signature of Applicant

[Note to Applicant: To ensure the submitted documents are complete and up to date. Applications that do not meet the requirement will be automatically rejected by the relevant authorities].

College ID No.:

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Mobile No.:

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FOR OFFICE USE

Student's request forwarded to VC/CAO for processing of application.

DEAN- RAKCODS