



## كلية رأس الخيمة للعلوم الطبية

## STUDENT'S REQUISITION FOR OFFICIAL TRANSCRIPT\*

[*TO BE ISSUED BY THE OFFICE OF THE EXAMINATIONS]									
Date://20									
То									
The DEAN-RAKCODS									
Dear Sir,									
I Mr. / Ms						, registered	in the	e acad	emic
year 20, hereby kindly request you to issue me an <b>Official Transcript</b> for the following									
semester(s)/year(s) of study at	RAI	Col	lege (	of Me	dica	al Sciences in RAK M	1edica	I & H	ealth
Sciences University.									
[Please tick the appropriate box for Official Transcript]									
Preclinical Semesters	I	П	Ш	IV		Clinical Years	III	IV	V
Signature of student									
College ID No.: Mobile No.:									
College ID No					5				
Current Semester/Year:									
FOR OFFICE USE									
Office of the Examinations to proce	ss th	ne red	quest.						
									_
						DEAN RAKCODS			