

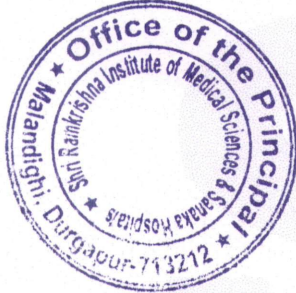
Ref: SRIMS&SH/PO/UG/B3/Internship/2026/510

Date: 13.06.2026

NOTICE

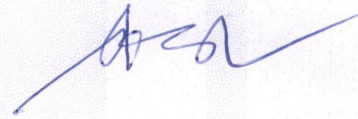
Compulsory Rotating Medical Internship Programme (Session June 2026-Jun2027)

1. With reference to the Review Result of the MBBS 3rd Professional Part-II Examination (March–April 2026), published by WBUHS vide Memo No. COE/UHS/0947/2026 dated 12/06/2026 & COE/UHS/0948/2026 dated 12/06/2026, students who have successfully cleared the said examination are hereby informed that their Compulsory Rotating Medical Internship (CRMI) will commence as and when notified by the Directorate of Medical Education (DME), Government of West Bengal.
2. In this context, all concerned students to urgently submit the duly filled **No Dues** Form (Enclosure I) to the Academic Section.



Enclosed:

- I. No Dues Certificate Format



Prof. (Dr) Col Debajyoti Bhattacharyya, IAV
Principal

Principal
Shri Ramkrishna Institute of Medical Sciences
& Sanaka Hospitals
Malandighi, Durgapur-713212

Copy forwarded for favour of information and necessary information to:

1. MS Office
2. Prof. (Dr) Rajarshi Gupta, Nodal Officer (CRMI & PG T-L Activities)
3. Departmental HOD(s) /In-charge(s)
4. Mr. Indranil Mallick, CEO (Administration-SETGOI)
5. Hostel Warden
6. Central Library
7. Accounts dept.
8. IT Department

Ref: SRIMS&SH/PO/UG/Internship/2026/510

Date: 13.06.2025

ENCLOSURE - I
"No Dues Certificate" (MBBS Internship June 2026-Jun2027)

Name of the Student	
Course	MBBS
SRIMS ID	
Batch	
WBUHS Registration No.	

Sl. No.	Department	Remarks	Full Signature of the HOD/ In-charge with Date
1.	Girls/Boys Hostel	No Dues	
2.	Central Library	No Dues	
3.	Accounts	No Dues	
4.	Academic Section	No Dues	

1. That, I clearly understand, acknowledge and agree that the above "No dues" certificate is mandatory for commencement of my MBBS Internship Programme.

2. I do hereby declare that I have passed the MBBS 3rd Professional Part-II March - April, 2026 Examination in review (Roll No.: _____).

Full Signature of the Intern (with Date)