

Annexure Part-1

Delhi Academy Of Medical Sciences Pvt Ltd

Performa for requisition to sets of Study Material

Kindly issue _____ No. of sets for _____ students enrolled for _____
course in _____ centre for Medical/Dental stream.

Signature of Franchise

Annexure Part-2

Delhi Academy Of Medical Sciences Pvt Ltd

(For office use only)

Requisition has been received for _____ no of sets of study material for _____ no. of
students enrolled in the above centers kindly verify for the same in the Medical/Dental Stream.

To Pallavi Khurana For Verification

Rajwant Kaur

Signature

Signature

Annexure Part-3

Delhi Academy Of Medical Sciences Pvt Ltd

(For office use only)

Verified _____ no. of students have been entered in the ERP

Mr.K.K. JOSHI

Signature

Franchise Accounts