Memo no: SWMC/ 2015/ Date: 08.04.2015

To

**The Senior Consultant/Concerned Authority**

Chest Disease hospital, Sylhet.

Subject: **Request to visit Chest Disease hospital by the 4th year students.**

With reference to your verbal consent this is to inform you that our 4th year students require to visit different health service institutes as part of the course curriculum of Community Medicine. For the purpose we prefer your institute.

Program schedule is as follows-

|  |  |  |  |
| --- | --- | --- | --- |
| **Day** | **Date** | **Number of Students** | **Arrival Time** |
| Wednesday | 08.04.2015 | 30 | 11.30 am |

Thanking you in anticipation of your kind cooperation.

**Principal**

Sylhet Women's Medical College, Sylhet

Memo no: SWMC/ 2015/ Date: 08.04.2015

To

**The chairman**

Jalalabad Disabled and Rehabilitation Centre, Sylhet.

Subject: **Request to visit Jalalabad Disabled and Rehabilitation Centre by the 4th year students.**

With due respect this is to inform you that our 4th year students require to visit different health service institute as part of the course curriculum of Community Medicine. For the purpose we prefer your institute.

Program schedule is as follows-

|  |  |  |  |
| --- | --- | --- | --- |
| **Day** | **Date** | **Number of Students** | **Arrival Time** |
| Wednesday | 08.04.2015 | 30 | 11.30 am |

Thanking you in anticipation of your kind cooperation.

**Principal**

Sylhet Women's Medical College, Sylhet

Memo no: SWMC/ 2015/ Date: 08.04.2015

To

**Tahmina Begum**

Divisional Coordinator

Ashar Alo Society, Sylhet.

Subject**:** **Request to visit Ashar Alo Society by the 4th year students.**

With reference to your verbal consent this is to inform you that our 4th year students require visiting different health service institutes as part of the course curriculum of Community Medicine. For the purpose we prefer your institute.

Program schedule is as follows-

|  |  |  |  |
| --- | --- | --- | --- |
| **Day** | **Date** | **Number of Students** | **Arrival Time** |
| Wednesday | 01.04.15 | 30 | 11.30 am |

Thanking you in anticipation of your kind cooperation.

**Principal**

Sylhet Women's Medical College, Sylhet

To

**The Principal**

Sylhet Women’s Medical College

Subject: **Prayer for providing transport facilities for day visits of** **SWMC Batch- 07.**

Sir,

With due respect I would like to inform you that the students of **SWMC Batch- 07** (4th year) have to visit some health service institutes as part of their course curriculum and the program is scheduled as follows.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Day** | **Date** | **Time** | **Institute** | **Expenditure** |
| Wednesday | 08.04.2015 | 11.00 am-2.30pm | Chest Disease Hospital, Sylhet | 3 Hiace  2000×3  =6000/= |
| Wednesday | 08.04.2015 | 11.00 am-2.30pm | Jalalabad Disabled and Rehabilitation Centre, Sylhet. | ± 1000/= |
| Wednesday | 08.04.2015 | 11.00 am-2.30pm | Ashar Alo, Sylhet. | 3 Hiace  2000×3  =6000/= |

± 17,000/=

This is submitted for your kind approval.

Thanking you sir.

**Prof. Dr. Fazlur Rahim Kaiser**

**Prof & Head**

**Department of Community Medicine**

**Sylhet Women’s Medical College**

Ref: SWMC/MAG - / Date: 01/04/15

To

**The Director**

Sylhet MAG Osmani Medical College Hospital.

Subject: **Visiting Chest Disease Hospital by the Students of Sylhet Women’s Medical College.**

Dear Sir,

This is to inform you that for clinical exposure to the Infectious Disease & Tuberculosis Hospital I wish to send my students (Sylhet Women’s Medical College) at time.

Would you be kind enough to allow the visits of our students to your Infectious disease Hospital, Tuberculosis Hospital and oblige

Thanking you in anticipation for your kind co operation.

**Prof. Dr. Md. Rezaul Karim**

Principal

Sylhet Women’s Medical College.