

Sr.No.: _____/201
(For Office use)

To,
Director,
Board of Examination & Evaluation
Sant Gadge Baba Amravati University, Amravati.

Subject :- Application for Transcript Certificate

Sir,

Please issue me the Transcript Certificate to apply for _____
I need _____ sets of Transcript Certificate. Particulars Regarding myself and relating to Academic Qualification in College / Department to Sant Gadge Baba Amravati University are appended below :

1	Name of Student (Full Name)	
2	Enrolment No	
3	Name of College / Department	
4	Name of Exam Passed	
5	Pattern of Examinations	Annual / Pattern
6	Roll No & Year of Final Exam Passed (Summer / Winter)	
7	Division / CGPA Secured	
8	Academic Session of First Admission	
9	Medium of Instruction	
10	Total Xerox copies of only passed mark-sheets without attestation (of each year / Semester)	
11	Total Xerox copies of Degree Certificate	
12	Receipt / DD No. & Date	

Date : / /201
Phone No.: _____
Mobile No.: _____

Your's faithfully,
Sign.: _____
Name.: _____

Full Address : (Pin Code Essential)

: IMPORTANT NOTES :

- 1) Applicant will have to Submit all Digital Xerox copies (without attestation) on A4 Size Paper having good clarity with the application form.
- 2) Applicant completing Degree with CGS / CGPA Pattern will have to submit front & Backside Xerox of final Year mark-sheet.
- 3) Applicant will have to pay Rs.1000/- fees for 5 sets of Transcript at the University Cash Counter or by Demand Draft in Favour of **Finance & Accounts Officer, Sant Gadge Baba Amravati University, Amravati Payable at Amravati.**
- 4) The applicant can collect the Transcript Certificate from the office within 45 days or as informed by the University. After that University will send it by Register Post to the Indian Address only.
- 5) Incomplete application form shall be Rejected and no correspondence shall be done in this regard.