Shivaji University, Kolhapur

Students Facilitation Center Application form for Migration Certificate (M.C.) (Regular Student)

To, Director, Board of Examinations and Evaluation, Shivaji University, Kolhapur – 416 004.				
1. Name -		(First Name)	(Father/Husband Name)	
2. Mother's Nam				
3. Address for co	mmunication _			
	_		Pin Code	
4. e - mail	· · · · · · · · · · · · · · · · · · ·			
5. Telephone No.	with STD code	No	Mobile No	
6. PRN : 10 digit	PRN: 10 digit and / or 16 digit			
7. Last examinati	ion details -			
• Name of t	the college			
• Name of t	the examination			
• Result		ed photo copy of the mark-s	cheet & Duplicate T.C. taken from the last college)	
• Name of	the Course -			
• Name of t	the College or U	niversity Departmen	t	
• Address o	of the College or	University Departme	ent -	
• Name of t	the Affiliated Un (Please attach the	iversityadmission proof, such as cop	by of the receipt of the fee / Allotment letter)	
Date -			Signature of the student	
Copy of theDuplicate TCopy of new	e last examination m C.C. obtained from the w admission proof a	ark-sheet. ne last college. t proposed college.	ing documents with the application.	
 Demand dra Shivaji univ 	versity, Kolhapur, pa	ny nationalized / schedul nyable at Kolhapur." or r	ed bank, in favor of, "Finance and Account Officer, receipt of fee paid at University.	
The transfer ce	as been student of the ertificate is sent her een made previous t	ewith in duplicate. On	college since <year> and left in the <year application="" behalf="" candidate="" for="" migration<="" no="" of="" td="" this=""></year></year>	