

Shivaji University, Kolhapur

Students Facilitation Center

Application form for Transfer Certificate (T.C.)

(For External / Distance Education / University Department Student only)

To,
Director,
Board of Examinations and Evaluation
Shivaji University,
Kolhapur – 416 004.

1. Name - _____
(Surname) (First Name) (Father/Husband Name)
2. Mother's Name - _____
3. Address for communication - _____

_____ Pin Code - _____
4. e - mail - _____
5. Telephone No. with STD code No. - _____ Mobile No. - _____
6. PRN : 10 digit - _____ and / or 16 digit - _____
7. Last examination details –
 - Center of distance education – _____
 - Name of the examination - _____
 - Month & Year of the examination - _____
 - Examination Seat No. - _____
 - Result - _____

(Please attach the self attested photo copy of the mark- sheet)
8. New admission details -
 - Name of the Course - _____
 - Name of the College or University Department - _____
 - Address of the College or University Department - _____

 - Name of the Affiliated University _____

(Please attach the admission proof, such as copy of the receipt of the fee / Allotment letter)

Date - _____

Signature of the student

If you are sending the application by post, please attach following documents with the application.

- Copy of the last examination mark-sheet.
- Copy of new admission proof at proposed college.
- Self address envelope without stamp.
- Demand draft of Rs. 80/- of any nationalized / scheduled bank , in favor of, “Finance and Account Officer, Shivaji university, Kolhapur, payable at Kolhapur.” or receipt of fee paid at University.

सदर विद्यार्थ्यांचे टी. सी / एम. सी. मागणीची नोंद रजिस्ट्रेशन लेजरला पान क्र. ___ व अनुक्रमांक ___ वर घेतली असून विद्यार्थ्यांने पूर्वीच्या अभ्यासक्रमाचे या विभागाकडे जमा केलेले आहे.

Signature & Seal

Director / Dy. Registrar/ Registrar
Center for Distance Education /PG Admission/D.O.T.