

Dr. A.P.J. ABDUL KALAM UNIVERSITY, INDORE (M.P.)

Indore Dewas Bypass Road, Arandia, Indore - 452016

Application Form For Issue of Migration/Provisional Certificate

То,		To be filled by th		Recent Passport
The Registrar, Dr. A.P.J. Abdul Kalam I Indore. Sir,	Jniversity,	Dispatch No Date		size Photograph duly attested by Director/Principal with seal
I was a student of this University	ty studied as	Regular/Ex -student in t	the	
and passed the examination in the request you to kindly issue me Migra	Month and Y	/ear		(College)
The necessary fee of Rs				has been deposited in
Bank Draft No	of Bank		Dated	
 Full Name in English (In Capit Full Name in Hindi	passedster/yearnester/year)	Year Out of Out of Out of	Division/Gr	ade
Address:				Yours faithfully
PinPhone			•	signature of Student)
		D BY THE PRINCIPAL/HEAD		N
Certified that the eligibilite the original of the concerned. The candidate may be issued.	certificates, m	narksheets, office record		
Enclosures required: (Please tick (✓) in 1. ☐ For Provisional Certificate ple Principal/Head of the Institut 2. ☐ For Migration Certificate ple concerned Principal/Head of 3. ☐ Demand Draft is payable in fa Note: 1. Migration and Provisional cer 2. Incomplete application(s) wit 3. Recent passport size photogr Non Refundable Fees: Migration Certificate	ease enclose a colon. ase enclose cop the Institution. evor of Dr. A.P.J. tificate will be is hout requisite e aph self attested	ox if enclosed) opy of the Final Semester/Ye nies of the Final Semester/Ye Abdul Kalam University (Exa ssued after 30 days of receip nclosure (as above) shall not	ear Marksheet attestear Marksheet and m), Indore. It of application with the considered.	T.C. attested by the
_	s. 150/- s. 50/- extra	Provisional Certificate Postal Charge	Rs. 200/- Rs. 50/- extra	