

SRI VENKATESWARA INSTITUTE OF MEDICAL SCIENCES, TIRUPATI

ACADEMIC SECTION

ACAD FORM - 10

APPLICATION FOR ISSUE OF STUDY/TC/MIGRATION CERTIFICATE

From

Tirupati
Date:

To

The Registrar
SVIMS
Tirupati.

Sir / Madam,

Sub: SVIMS, Tirupati - Issue of Study/TC/Migration Certificate - Requested - Reg.

* * *

I admitted into
course during academic year and completed the course of study as
on I am here with attaching the provisional certificate.

The prescribed fee of Rs..... is paid by me vide challan
No....., Dt.....

Hence, I request you sir, to issue the Study/TC/Migration certificate at the earliest.

Thank you

Yours sincerely

Signature

Mobile No:

//forwarded by//

Signature of HoD with Seal

Note :

The request shall be accompanied with the Provisional certificate.