

DR. C.V. RAMAN UNIVERSITY

Kargiroad Kota, Bilaspur (C.G.)

Application form for Transfer Certificate

| To, | | |
|--|----------------------------------|--|
| Registrar, Dr. C.V. Raman Univ Kargiroad, Kota, Bila | versity, | |
| groud, Rota, Bija | ispur (C.G.) | |
| Name of Department | | |
| Student Name (English) | | |
| Father/Husband Name | | |
| Date of Birth | | |
| Name of Course | | |
| | Session | |
| Roll No. | Session | to |
| Enrollment No. | | |
| Division: | | |
| Name of Exam Center | Theory | Practical |
| | | |
| Student's Postal Address : | | |
| | | |
| | | |
| | Tel. No. / Mob. | |
| | | |
| I agree to receive my | Certificate. The certificate fee | es of Rs. 150.00 (One Hundred |
| Fifty only) Challan No with this application form and | 17816 | is enclosed here |
| ALTauton tolin diff | i Deciaration. | 고려는 그 같이 그런데 작업이고 하다. 한글로 기계를 하는 소급이 되었다. |
| Place: | | |
| Date: | | |
| | | Applicant Signature |