

Kannada Sangha Pune's Kaveri College of Arts, Science and Commerce

To,	
The Principal,	
Kaveri College of Arts, Science and Commerce,	Pune

Subject: Application for obtaining Transfer Certificate

Respected Sir / Madam,

Ι	undersigned	wish	to	apply	for	Transfer	certificate.	Ι	have	passed	/	failed
(Class and Course) in the Academic year								•				

My details are as follows

Name								
Contact No.	E. Mail Id:	_ E. Mail Id:						
		Last Exam Appeared Seat No.:						
Last Examination Month and Year:								
The purpose of the transfer certification	ate is for (Tick Appr	opriate option)						
Higher Education Employment								
Details	of Higher Education:							
Course Name (Seeking Admission	Го):							
Name of the New College / Instituti	ion:							
Affiliated University Name:								
	OR							
	ails of Employment							
Name of the Organization:		· · · · · · · · · · · · · · · · · · ·						
Designation:								
Additional transfer co Yours faithfully,	ertificate for purpos	se of migration.						
Signature of the Student								
Encl: Xerox copies of last examination pa	assed / failed.							
NO DUES REMARK								
Fees (Office)	Library	Course Coordinator						
	Principal							
Fo	or Office Use Only							

TC Issue No.

TC issue Date

Sign of the Issuing Clerk