

Before applying, please check on www.mgmudpo.edu.in that latest version of the form is being used

Application for Transcript Certificate (version 2022/01)

To:

The Principal

MGM University Department of Prosthetics & Orthotics.

Respected Madam,

I firmly request you to issue me a “**Transcript Certificate**” as early as possible. My personal details are given below:

- 1) **Name of Candidate**.....
(As mentioned in the final year/Last semester examination Mark Sheet OR Degree Certificate)
- 2) **Father’s Full Name:**
- 3) **Mother’s Full Name:**
- 4) **Email ID:** **Mobile No:**
- 5) **Address:**
- 6) **Date of birth** :

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- 7) **Month & Year of admission** :

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- 8) **P.R. No.** :

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- 9) **Month & Year of completion of Program:**

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- 10) **Program Name:**

Each of the following documents are mandatory and must be attached along with this application form otherwise application form will be rejected without any intimation.

- (i) All Statement of marks (including fail marksheet) (Attested Photocopy).
- (ii) Degree Certificate (Attested Photocopy).
- (iii) 12th Leaving Certificate (Attested Photocopy).
- (iv) Pay ₹ 5,000/- through ‘SBICollect online payment portal’
link is <https://www.onlinesbi.com/sbicollect/icollecthome.htm> and attach e-receipt of SBI Collect payment. **Please note that other mode of payment will not be accepted.**

Thanking you,

Yours’ faithfully,

Date: /...../20

Signature of student

Approved by

Date: /...../20

Director)