JAMSHEDPUR WOMEN'S UNIVERSITY
JAMSHEDPUR

Sl. No.

APPLICATION FORM FOR ISSUE OF

MIGRATION CERTIFICATE

1. Name (In Block Letter) :……..
   Name (In Hindi) : ……..
2. Father's Name (In Block Letter) : ……..
   Father's Name (In Hindi) : ……..
3. Mother's Name (In Block Letter) : ……..
   Mother's Name (In Hindi) : ……..
4. Registration number of the University:……..……..Year ……..

   (Copy of (i) Registration receipt, (ii) Mark sheet, (iii) Admit Card, (iv) C.L.C. should be attached in proof of Registration No. duly attested by the H.O.D)
5. Details of the examination passed or failed : -
   a) Name of the University: ……
   b) Examination Roll No. :…….. Class Roll No. ……..
   c) Name of the examination: ……
   d) Passed: Division/ Class ……Year ……..
   e) If failed: Year ……..
   f) Date of Leaving the institution ……
   g) When left the Department (attach photo-copy of D.L.C.) ……

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6. If reported of debarred for use of unfair means at the last examination, please give the following details: -
   Examination …….. Roll No. ……..
   Centre ……Year ……..…. Regular/Supplementary

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7. Challan No. of Migration Fees …… Date ……..
   Amount of fee paid: Rs. ……
8. Permanent Address ……
   ……
9. Present Address ……
   ……

10. Date …… Signature of the Applicant

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11. Fee for Migration : Rs. 250/- Within a week
    Rs. ……../-same day
12. Certified that the applicant was a regular student of this University and nothing against her character, Migration Certificate may be issued.

Dated :

Signature and seal of the
Head of the University

Note: Requisite fee in the form of D.D./Cash be submitted along with the form.