| To, | | | | | | |
|-------------------|-----------------------|---------------|-------------------------|----------------------|--------------|------------|
| The Controller o | f Examination | | | | | |
| Sant Gadge Bab | a Amravati Unive | rsity | | | | |
| Amravati. | | | | | | |
| | | | | | | |
| Sir, | | | | | | |
| I, (Old N | ame in Block Lett | ters) | | | | |
| | the stu | ident of the | Unive | ersity apply for the | change to | be made |
| in my name in th | ne University reco | rds. I am en | rolled | / registered in the | University | as per |
| my name mentio | oned above details | of the same | are a | s stated below. | | |
| Name of College | | | Enrolment no / Reg. No. | | | Year |
| | | | | | | |
| T 1111 | 1 2 2 | . 5: | 1 7 | | | <u>I</u> |
| I would like to c | hange it to (New r | name in Blo | ck Let | tters) | | |
| | C.I. II | . 1:17 | | | . 1. | .1 |
| | of the University | to which I | was ac | dmitted during the | period in | the |
| University are: - | T | Г | | T | Г | |
| Name of | Year | Roll No. | | College Code | Result | |
| Exam | | | | - | | |
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| | | | | | | |
| | • | • | • | xamination of | | |
| • | | | | | | |
| The appropriate | | 11 0 | | nange of name on | Ü | |
| mentioned above | | | | | | is |
| forwarded herew | ith. It is further st | ated that I h | ave n | ot migrated from t | his Univer | sity. |
| I, hereby | solemnly declare | that the info | ormati | on furnished by m | ne in this a | pplication |
| is true. | | | | | | |
| | | | | | | |
| (| |) | (| | |) |
| Full Sign. Of Ap | pplicant as per Old | Name | Full | Sign. Of Applicar | nt as per No | ew Name |
| | | | | | | |
| My Full Addres | SS: | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

ENDORESMENT

Application forwarded for necessary action. The information supplied by the applicant is checked and found correct. I have no objection for the change to be made.