

DEGREE AWARDING REQUEST FORM

| l, | Registration | No | enrolled in | degree |
|----------------------------|----------------------------------|-----------------------|-------------------------|------------------|
| program have completed the | • | | | ed requirements. |
| Normal mode of Degree C | | | ŕ | |
| Urgent mode of Degree Co | ollection, Rs. 6,000/- (| Preparation duration= | 30 days, after Clearanc | ;e) |
| | | | Applicant's | - |
| | | Office use only: | | |
| Accounts Office: | | Registration O | ffice: | |
| Outstanding Balance Rs: | | Name: | | |
| Degree Charges Rs | | Signature: | | |
| Name: | | | | |
| Signature: | | Date. | | |
| Date: | | | | |
| Dograp awarding data | | | | |
| Degree awarding date | | | | |
| Name of Student: | Name of Student:Registration No: | | | |
| Please collect your Degre | ee from Examination | department on | | |
| Signature: | | | | |
| Examination | ı's Officer | | | |