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Name of the Student

Register Number

Degree

NO.OF TRANSCRIPT APPLIED

DATE OF SUBMISSION OF APPLICATION:

TOTAL FEES PAID



*Please see overleaf for Instructions

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APPLICATION FOR TRANSCRIPT CERTIFICATE

	4	Branch	
	5	Year of Admission	
	6	Month and Year of last appearance	
	7	Class obtained & CGPA	
	8	Number of Transcripts required	
	9	Total Fee Paid Challan No / DD No & Date (Attach receipt or D.D)	
Dat	e:		Signature of the Student
Mol	bile. N	No:	
Add	lress	for Communication:	
Rec	eived	l the Certificate:	
		FOR OFFICE	USE ONLY
Issu	ıed tł	ne Certificate on	
			Assistant Registrar/Section Officer
		STUDENT	СОРУ
NAME OF THE STUDENT :			Serial No:

Documents Required:

- 1. Application Form
- 2. Fees Receipt

Fees Details:

- 1. For the first Copy:- Rs. 500/- and Rs.250/- for every additional Copy
- 2. Students may pay the fees at the Indian Overseas Bank situated inside the campus or through Demand Draft in favour of "Registrar BSAU Exam Fees".

Guide lines:

Submit your application at the Student Section only which is located at Office of the Controller of Examinations, BS Abdur Rahman Crescent Institute of Science and Technology (or) if applying through post, send the documents to:

The Controller of Examinations,

BS Abdur Rahman Crescent Institute of Science and Technology,

GST Road,

Vandalur,

Chennai,

Tamilnadu, India.

Pincode: 600 048.

 $^{{}^*}$ Incomplete form will not be accepted.