



**APPLICATION FOR DUPLICATE CERTIFICATE OF
PROVISIONAL CERTIFICATE / CGCM**

Date:

STUDENT NAME :

BRANCH :

HT NUMBER :

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REGULATION :

Tick (√)	Name of the Certificate	Month & Year of Passing	Fee Particulars
	Provisional Certificate		
	Consolidated Grade / Credit Memo		

Any other Discrepancy:

Name & Signature of the Student:

Mobile Number:

PRINCIPAL

Enclosures:

- i) X Class Xerox Copy
- ii) Police Complaint Letter
- iii) Affidavit (Notary)
- iv) Fee Payment Receipt (Rs. 400/- for each)

