



GITAM UNIVERSITY

(Declared as deemed-to-be-University u/s 3 of the UGC Act, 1956)

VISAKHAPATNAM-530 045, (A.P)

DIRECTORATE OF EVALUATION

APPLICATION FORM

FOR TRANSCRIPTS

1. Name of the Candidate (as in SSC, in capital letters)							
2. Regd.No & Year of Admission		Regd. No:				Year of Admission:	
3. Campus		Visakhapatnam <input type="checkbox"/>		Hyderabad <input type="checkbox"/>		Bengaluru <input type="checkbox"/>	
4. Address for Correspondence						PIN Code :	
5. Contact No.		Mobile No:			Landline with STD:		
6. email Id:							
7. Fee particulars: Enclose Original Challan/DD to the application. In case of DD, write your name & Regd. No. on the reverse.							
Amount paid: Rs.		Challan/D.D No:		Date of Payment:			
Name of the Bank:		Branch:					
8. Details of Transcripts Required							
S.No.	Program	Branch	Semester/ Trimester	Particulars Grade Card / PCMG / OD etc		No. of Transcripts	
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
						Total:	

Place:

Date :

Signature of the Candidate