



Rajiv Gandhi University of Knowledge and Technologies
Mylavaram Road, Nuzvid, Krishna District, AP- 521202
Application for Transfer Certificate

Name (in capitals as per SSC) _____

S/O, D/O (as per SSC) _____

Date of Birth (as per SSC) _____ Course: PUC B. Tech M. Tech

Branch: ECE CSE ME CE ChE MME NA

Year of Admission _____ Year of Passing _____ Division / CGPA _____

Permanent Address _____

Contact No. (With STD Code) _____ Mobile No. _____

E-mail Address _____

Reason for TC _____

Enclosure: Dues form attached

Date: _____ ID No _____ Signature of the Student _____ Signature of Parent _____

Signature of the HOD _____ Signature of the Dean Academics _____ Signature of the Director _____

OFFICE USE

Issued the Transfer Certificate

Verified and T.C. No _____ Prepared _____ Signature of the Academic Section _____

Received the T.C. No _____ Date _____ By me, Signature of the Student _____