

DIRECTORATE OF EVALUATION

GANDHI INSTIUTE OF TECHNOLOGY AND MANAGEMENT

(GITAM)

(Declared as deemed-to-be-University) VISAKHAPATNAM-530 045, (A.P)

APPLICATION FORM FOR NAME CORRECTION

In-person		By Post:							
1	Name of the Candidate								
1.	(as in SSC, in capital letters)								
2.	Program & Branch								
	Regd.No & Year of Admission	Regd. No: Year of Admission:							
4.	Campus	Visakhapatnam 🖂 Hyderabad 🗔 Bengaluru 🗔							
	Address for Correspondence								
	·	Village/Town/City:							
		District:	State:						
6.	Contact No.	Mobile No:	Landline with STD:						
7.	email Id:								
8.	8. Fee particulars: Enclose online payment Challan/DD to the application. In case of DD, write your name & Regd. No. on the reverse.								
	Amount paid: Rs. Cha	Illan/D.D No:	Date of Payment:						
	Name of the Bank:		Branch :						
9. Name printed in the present Certificate:									
10.Name to be corrected as :									
11.Corrections to be made : As per SSC: As per Gazette Notification: (Tick in relevant box & enclose relevant photo copy)									
	S. Semester/ Type of Certi		Semester/ Type of Certificates						

S.	5. Semester/ Type of Certificates		S.	Semester/	Type of Certificates
No.	Trimester	Grade Card / PCMG / OD	No.	Trimester	Grade Card / PCMG / OD
1.			6.		
2.			7.		
3.			8.		
4.			9.		
5.			10.		

NOTE: Original Certificate(s) are to be returned along with Application Form

Place: