

DIRECTORATE OF EVALUATION GANDHI INSTITUTE OF TECHNOLOGY AND MANAGEMENT (GITAM) (Declared as deemed-to-be-University)

VISAKHAPATNAM-530 045, (A.P)

APPLICATION FORM FOR TRANSCRIPTS

1.	Name of the Candidate					
2.	Registration Number					
3.	Particulars of the qualifying Examination	Program	Branch	Period of study	Month & year of passing	
4.	Campus					
5.	Address for correspondence (in capital letters only)	H. No/Flat No:		Street:		
		Colony/Area:				
		Village/Town:				
		District:		State:		
		Pin Code:				
6.	Contact Details	Mobile:				
		Land Line:				
		Email ID:				
7.	Number of Transcripts required					
8.	In-Person/By Post					
9.	Fee Particulars (Enclose Original	Rs.				
	Challan/DD)	Transaction ID/DD No:				
		Date of Payment:				
		Name of the Ba	nk:	Branch:		

Place:	
Date:	Signature of the Candidate