



GOUTHAM INSTITUTE OF MEDICAL SCIENCES AND TECHNOLOGY (Regd.)

# GOUTHAM COLLEGE

# 258, 5th Main, 2nd Cross, Manjunathnagar 1st Stage, W.O.C. Road, Rajajinagar, Bangalore - 560 010.

Tel.: 080-23303737, 23492763, 23597784, 23232244, Fax: 080-23118101

E-mail: gouthamgiri@yahoo.co.in Website: www.gouthamcollege.org

## Application Form for obtaining Provisional / Other Degree / Diploma Certificate from College

**COURSE:** .....

1. Name in Block Letters : .....
  2. Father's Name in Block Letters : .....
  3. College I.D. No. : .....
  4. Name of the University / Board : .....
  5. University/Board Register No. : .....
  6. Date of Birth (as per 10th Std. record) : .....
  7. Course of Study : .....
  8. Duration of the course From : ..... / ..... / ..... to ..... / ..... / .....
  9. Internship Date & Month From : ..... / ..... / ..... to ..... / ..... / .....  
(Note: Orientation & Make up duty not included)
  10. Class obtained in qualified examination .( I,II, Pass, Distinction, Rank)
  11. Date, Month & Year of Final Year Examination held : .....
  12. Thesis / Project done on : .....
- .....

The above information given is complete and accurate to the best of my knowledge.

Further I hereby state that I have completed the course as per norms of the University / Board .

### Signature of the Student

I have personally verified the above furnished Information and hereby recommend / not recommend to issue document(s) applied for.

Signature of the H.O.D.

PRINCIPAL

### ENCLOSE XEROX COPIES OF :

- |                              |   |
|------------------------------|---|
| 1. X Std. Marks Card         | 2. Uniform Photos - 4 Nos.                  |
| 3. All Marks Cards           | 4. All Internship Completion Certificate    |
| 5. No Due Certificate.       | 6. Course Completion Certificate (Original) |
| 7. <b>ID Card - ORIGINAL</b> | 7. All Year Fees Payment Receipt - Xerox    |

**N.B. : 1. Payment of Rs. 1,500=00 for Diploma, UG-Rs. 2,000 & Rs. 2.500=00 for PG Dgree with effect from February 2009**

**2. The above Certificates are issued only after clearance of College /Department No Dues if any.**

**3. All formalities should be completed before 11-00 am and the Certificate will be issued the next working day at 4-00 pm. Rs. 500=00 extra will be charged if the certificates are required on the same day. (Above may vary please Check in Office before paying)**



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## STUDENT NO DUE CERTIFICATE

I Mr. / Ms. .... From Ist / IInd / IIIrd/  
IVth year / Internship (Tick Appropriate) Students of the  
..... Course for the Academic Year of  
200\_\_ to 20\_\_ Department of ..... Please furnish the  
following required data to enable me to take my original documents from the  
College.

### APPLICANT SIGNATURE

1. ACCOUNTS SECTION : .....
2. LIBRARY SECTION : .....
3. BANK SECTION : .....
4. HOSTEL SECTION : .....
5. LABORATORY SECTION  
(IF ANY SPECIFIC BREAKAGES) : .....
6. COMPUTER LABORATORY : .....
7. CLINICAL SECTION : .....
8. INTERNSHIP : FROM.....TO .....

HOD

CLINICAL CO-ORDINATOR

PRINCIPAL

- Note :**
1. Please check for any dues, if satisfied issue the no objection certificate.
  2. If any loss of book is found in the library please specify the price.
  3. If any damage / breakage's cause in college / hostel specify the damage.