


KANNUR UNIVERSITY
SCHOOL OF DISTANCE EDUCATION
APPLICATION FOR TRANSFER CERTIFICATE

1	NAME <i>(As entered in Qualifying Certificate)</i>	in English (Capital Letters)	
		in mother tongue	
2	Male / Female		
3	Age & Date of Birth (DD/MM/YY)		Age: D.O.B. :
4	Course Completed & period of study		Course: Academic Year to
5	Enrolment Number <i>(Attach original Identity Card. In case the original I D Card is irrecoverably lost, attach separate application & Fee receipt towards Duplicate I D Card)</i>		
6	Centre of Examination		
7	Month & Year of the University Examination for which the candidate registered last time. <i>(Attach copy of Hall Ticket / Grade Card)</i>		
8	Whether passed or failed		
9	Whether the course is completed or discontinued <i>(If discontinued, specify the reason)</i>		
10	Purpose of obtaining Transfer Certificate		
11	Particulars of fee due , if any		
12	Address with Pincode to which communications are to be sent Phone:		

DECLARATION

Particulars furnished above are true and correct to the best of my knowledge and belief.

Date:

Signature of candidate

Documents to be enclosed. 1. Identity Card 2. Copy of Halticket / Grade Card 3. Self addressed & stamped envelope
4. Application & Fee for duplicate ID Card in case the Identity Card is lost.

FOR OFFICE USE

Verification Report:

T.C. Folio No.

Date:

Assistant

S.O.

A.R. / D.R.