VPKBIET, BARAMATI

Application for Transference Certificate

Name of Student (Full Name (In Capital Letters)	e) :-	(Surname)	(First Name)	(Middle Name)
Admission Type	:-	FE / DSE	Branch :	
FE / DSE Admission Year	:-	20 - 20		
Month & Year of Passing	:-	Oct. / May 20	(Attach Xerox	Copy of B.E. Mark sheet)
Reason for TC	:-		Collect	etion of TC:- By Hand
After BE, there is any admission	on :-	Yes No	(Tick appropria	ate)
f yes, Give College Name	:-			
Job Details	:-	Service / Self Emp	loyment / Business / C	other
Name of Organization	:-			
Address of Organization	:-			
Govt. / Private	:-		Package	:
Students Full Address	:-			
				Pin
Mobile No		E-mail. :		
In case of Postal detransit, the college office is advised to collect their Tobefore collection of TC. In 100/- Stamp Paper and F.I.F. Section of College Website (not re Γ C in 1 Duplica R. copy	sponsible in case person. Pl. Call of te TC will be issue from Police Station	of the aforesaid facts on 02112-239503 and on submission of No. Matter of Affidavit	nd confirm TC status otarized Affidavit on Rs.
		(For Accour		,
No Dues form sub		`	Yes	No
Original FE/DSE Fee Receipt submitted			Yes	No
If no, send Original FE/DS	E Fee I	Receipt to College .	•	for further processing. ignature of Accountant)
Remarks :				
			(4	Administrative Officer)



Vidya Pratishthan's KAMALNAYAN BAJAJ INSTITUTE OF ENGINEERING & TECHNOLOGY

Vidyanagari, Bhigwan Road, Baramati, Dist. Pune. Pin. 413 133. (Formerly Vidya Pratishthan's College of Engineering, Baramati)

NO DUES CERTIFICATE

	Date : / /20	
Name of the Student :		
Mobile No	Pass out Year :	
Exam. Month & Year :	Exam. Seat No	
•	pest of my knowledge, have no dues towards the Institute. In case any due is found at a later date to the Institute immediately.	
(Student Section)	(Student Sign.)	

Please, intimate Office if anything is dues outstanding against the above student.

Sr. No. Name of the Department **Dues Outstanding** Signature 1 **Head of the Department** 2 Workshop 3 **T & P Section** 4 Library 5 **Sports Section** 6 **Store Section** 7 Hostel 8 Mess 9 Canteen

Registrar Principal

Scholarship Section

Account Section

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Consent Letter and Bank details.

I, the undersigned, Mr. /N	∕ls		
Branch:		Roll No	
Year_of_Passing	Cell No:		_
Email:			
Address			_
		500/- from my Caution Money Dep ciation, Baramati as my contribution	
I also request to transfer Fees and other dues to m		after deducting above contribution, etails as follows.	, TC
Place	()	
Date: / /20	Sto	udent's Full Name & Signature	
_			
My Ba	nk Account De	tails are as follows.	
Beneficiary Name:			-
A/c No. :			
Bank Name:			
Branch Name & Address:			
IFSC Code:			
Sign:-			