



## NARULA INSTITUTE OF TECHNOLOGY 81, NILGUNJ ROAD, AGARPARA, KOLKATA – 700 109

## FORM OF APPLICATION FOR TRANSCRIPT

To, The Controller of Exami	nation		
Sir,			
I,copy/copies of Transcrip are given below:	(Name of the Stot(s) from Narula Inst	tudent), beg to apply fo itute of Technology in r	r Number of my favour. The particulars
Name:			
University Roll No:			
University Registration N	No:		
Course Name:			
Year of Admission:		Year of Passing:	
Result of Semester Exam	nination:		
Semester	SGPA	YGPA	DGPA
1 <sup>st</sup>			
2 <sup>nd</sup>			
3 <sup>rd</sup>			
4 <sup>th</sup>			
5 <sup>th</sup>			
6 <sup>th</sup>			
7 <sup>th</sup>			
8 <sup>th</sup>			
Thanking You,			
			Yours Faithfully,
Date: Phone No.			(Signature of Student)
Encl: Self attested copies o	f all Semester Mark she	eets.	,



## **RULES AND CONDITIONS**

- 1. Courier service is not available.
- 2. Rate of Fees. Transcript Rs. 500/- (Rupees Five Hundred only) per copy.
- 3. Candidate should submit the fees at the Accounts Department and attached the receipt copy of payment with the application.
- 4. Candidate should submit all the Xerox copy of Grade Cards along with the Application.

By Order

Controller of Examination