

**\* Application form for collecting Marksheet \***

SARVAJANIK EDUCATION SOCIETY

**Shree Ramakrishna Institute of  
Computer Education &  
Applied Science, Surat.**

B.Sc. / M.Sc. 20 - 20 Sem. \_\_\_\_\_

To,  
**Principal  
Shree Ramkrishna Institute of Computer  
Education & Applied Sciences,  
Athwalines, Surat.**

|                                   |
|-----------------------------------|
| <b>Student's Name:</b>            |
| <b>Course :</b>                   |
| <b>Date :</b>                     |
| <b>Contact No: M. –<br/>Ph. -</b> |

**To collect \_\_\_\_\_ Marksheet from the college / University.**

Respected Madam,

I have to attend the interview for the admission in \_\_\_\_\_ course on \_\_\_\_\_ date and for the same I need my original \_\_\_\_\_. mark-sheet. I will return my original mark-sheet on \_\_\_\_\_ date in the College office. If I fail to do so my admission will be cancelled and I will be responsible for the same.

I authorize \_\_\_\_\_ to collect the mark-sheet on behalf of me.

**Encl.(1)Photo copy of call letter for the counseling**

**(2) Original fee Receipt**

**(3) Photo copy of Student & Guardian / Authority Photo Identity proof**

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Parent Signature**

\_\_\_\_\_  
**Principal**

*Received the original documents submitted at the time of admission.*

**Student's Signature**

**Date :**

**Clerk's Signature**

**Date :**