



GOKULA KRISHNA COLLEGE OF PHARMACY

SULLURPET - 524121. A.P – INDIA.

Application No.

APPLICATION FOR DUPLICATE TRANSFER CERTIFICATE

1. Name of the Student (Block Letters) :
(As per SSC)
2. Date of Birth :
3. Class & Branch :
4. Register Number :
5. Father's Name (Block Letters) :
(As per SSC)
6. Sex : (Male / Female)
7. Religion / Caste :
8. Reason for applying duplicate TC :

Date:

Signature of the Student

SULLURPET

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For Office use only
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Remarks: Issue / Not Issue

Accountant

Jr. Asst.

A.O

Received the Duplicate Transfer Certificate

PRINCIPAL

Date & Time