

Application for Degree Certificate

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Regd.	No.																				
1.	Name of the Candidate: (Capital Letters)																				
	(Сарт	tai LX						ı	ı							1	ı		ı		
Surnar	ne:																				
Middle Name																					
								ı	ı			ı	ı				ı	1	ı		
Last N	ame:																				
2.	Prog	ram i	name:																		
				(Ph.I	D, M	1. T	ech,	MB	8A, 1	3.Te	ech.)							
3.	Branch :																				
4.	Major Specialization:																				
5	Mino	Minor Specialization:																			
6. Address for Communication:																					
	Name of the Candidate :										Father Name:										
	Door No City / Town / Village District				:					Street :											
					:					Mandal / TQ :											
					:					PIN code :											
	State				:						Mobile No :										
	Mail	id					:														
			F	Recei	pt to	o be	give	en to	car	did	ate l	by J	r. A	ssist	tant						
Red	eived	the a			_		_										e f	rom			
			(S	tuder	nt Na													_			
Fee pa	aid	:										C	hall	ana	No	:					
Date	:									Signature :											
										Name :											
												D	ept.	stai	np.	:					

	a) Convocation in Person - for stude Convocation hall by 8.00 AM on	ents opting for this option, it is r	nandatory to report at									
	02.08.2025 for 13 th Convocat	ion. (Fee Rs.3000/-)										
	Boys has to maintain dress code of white kurta and white pyjama Girls has to maintain dress code of white kurta and white salwar											
	b) Absentia - After the convocation from the university office (Fee Rs. 5000/-)											
	c) Absentia - Through Post (Fee Rs	s. 5000/-)										
8.	Fee Particulars: Fee may be paid in form of Demand Draft drawn in favour of "VFSTR Examination Account" 'Payable at Guntur' OR fee may be paid in counter available at VFSTR Finance office.											
	a) Demand Draft No: Issued Bank:	Date:	Amount:									
		OR										
	b) Chalana No :	Date:	Amount:									
9.	Enclosures to the application:											
	a) Demand Draft / Chalana:											
	b) Photo copy of the Provisional Cer	rtificate*:										
	* If Provisional Certificate copy is r in person and has to produce 'No due	· · · · · · · · · · · · · · · · · · ·	ubmit his application									
	The filled in application form along office of Controller of Examinations											
Date:												
Place:		Signatu	re of the Student									
a	To be filled by office of The candidate has fulfilled all the	f the Controller of Examination academic requirement for the										
	and has secured		class.									
	The Degree Certificate bearing No		is issued.									
	Application Processed by											
	Date:	Contro	ller of Examinations									

Candidate's preference for obtaining the Original Degree (Please Tick the appropriate box)

7.