

APPLICATION FOR ISSUE OF MEDIUM OF INSTRUCTION CERTIFICATE

(For candidates studied in regular courses only)

(Not to be used by the candidates studied in Directorate of Distance Education or Twinning Programme)

(TO BE FILLED IN BY THE CANDIDATE)

Details of the Payment

Name & Branch of the Bank:

Challan No./DD No.....dated.....for Rs.....

1. Name of the candidate :
2. Name of the course :Branch:.....
3. Register Number :
(enclose the copy of the degree/provisional certificate)
4. Name of the Institute where Studied :
5. Year of Passing :
6. Mobile No :7. Email Id
7. Communication Address :
.....
8. Purpose of certificate :

Date:

Signature of the Candidate

INSTRUCTIONS TO CANDIDATES

1. The fees prescribed for the issue of Medium of Instruction certificate is Rs. 500/-
2. The fees of Rs. 500/- should be remitted in the Indian Bank Pondicherry University Branch by Challan in the University Account No. 6659344508
3. Candidates applying by post should submit a Demand Draft for Rs. 500/-drawn in favour of "The Finance Officer, Pondicherry University, Pondicherry" along with a stamped self-addressed envelope for Rs.42/- (stamp value will vary according to the distance, so the same may be obtained from the post office).
4. Xerox Copy of the Degree Certificate/Mark Statement/Transfer Certificate duly attested by the Gazetted Officer or with self-attestation is to be enclosed with the Application.
5. The filled application form along with its enclosures may be sent to :

**The Asst.Registrar(Aca-Gen)
R.Venkataraman Nagar
Pondicherry University
Pondicherry 605 014.**

CHECK LIST

Sl. No.	Particulars	Tick
1.	<i>Application Form</i>	
2.	<i>Demand Draft or Challan for Rs. 500/-</i>	
3.	<i>Provisional Certificate / Degree Certificate & Mark Statements</i>	
4.	<i>Transfer Certificate</i>	
5.	<i>Stamped Self addressed Envelope for Rs. 42/-</i>	

Signature of the Candidate

FOR OFFICE USE (Academic Section)

The application may be referred to Examination Wing for verification of the medium of instruction.

S.O(Aca-Gen)

A.R.(Aca-Gen)

A.R./D.R. (Examns.)

EXAMINATION WING

Name:

Register No.....Year of

Passing:.....

Course:.....Branch:.....

Name of the Institution:.....

Certified that the above particulars are found to be correct and the candidate may be issued the medium of instruction as

S.O.(Exam)

A.R./D.R.(Exam)

A.R. (Aca-Gen)