

Date:

To The Director, Research & Development Cell, JNTUH, Hyderabad.

Sir,

Sub: Issue of OR	IGINAL CERTI	FICATE(S)	-TEMPOR	RARY PURPOSE	- Requested-Reg.
		C 1.1	C .1	X	

	(Before completion of the course) ****		
1. Name of the Scholar (In Caps)	:		
2. Father's Name	:		
3. H. T. No	:		
4. Department	: Date of Issue) 		
5. Date for return of Originals (Maximum of Two Weeks from6. Original Certificates Required			
7. A) E-mail ID			
B) Telephone Number with STD	Code/ Mobile No.:		
8. Communication Address :			
	<u>Y</u>		
	CANDIDATE'S SIGNATURE		
SIGNATURE OF CO-SUPERVISOR NAME:	SIGNATURE OF SUPERVISOR NAME:		

Office Seal:

Office Seal:

Note: At the time of collecting the Original Certificate <u>bring first paid original fee receipt</u>. <u>The following list of enclosures should be attached:</u>

- **1.** Copy of the Admission Procds. Letter Issued by the Director Admissions.
- 2. Copy of the All Tuition fee Paid Receipts (Along with Admission Fee Receipt)
- **3.** Copy of photo Identity proof.
- 4. Proof of specific requirement order copy.
- 5. Non Judicial Stamp of Rs. 10 with notary as per the proforma given below.

NOTARIZED

ON RS.10/- INDIA NON-JUDICIAL STAMP PAPER

AFFIDAVIT

I,		Aged about	
occupation: employed as	, with M/s		
			Permanent
resident of H. No:	Post Offic	ce Name	,
Police Station Name	, do hereby solemnly and sincerely affirm and	state on oath as	follows:

1) 2)	I am the deponent herein as such I am well acquainted with the facts of this affidavit. I submit that I need SSC/P.G. in order to submit the same to		
	purpose	as per Official letter No:	
		. (Proof of requirement document copy is enclosed)	
3)	I will return the O.D. on or before	Maximum two (2) weeks	

I hereby declare the facts stated above are true and correct to the best of my knowledge and belief. Hence the affidavit.

Place: Date:

DEPONENT

(Signature of the Research Scholar)

SIGNED BY NOTARY