



Date:

To
The Director
Directorate of Research & Development,
JNTUH, Hyderabad.

Sir,

Sub: ISSUE OF – ORIGINAL CERTIFICATE(S) – Requested-Reg.
(After receiving Provisional Certificate)

* * * *

1. Name of the Scholar (In Caps) : _____
2. Father's Name : _____
3. H. T. No. : _____
4. Department : _____
5. **Purpose of requirement** a) On Completion of Ph.D./M.Phil./M.S. _____
(Enclose Copy of Provisional Certificate)
6. Photo Identification Proof (copy should be enclosed): _____
7. A) E-mail ID : _____
B) Telephone Number with STD Code/ Mobile No.: _____
8. Communication Address : _____

CANDIDATE'S SIGNATURE

ACKNOWLEDGEMENT

Received all certificates from the DRD, JNTUH, Hyderabad.

CANDIDATE'S SIGNATURE