

Date: / /

From

Name : _____

Address: _____

Mobile No.: _____

To,
The Director
AKIMSS,
Solapur

Subject: Application for TC & Migration

Respected Sir,

I _____ is/was a student of this institute. I am studying in/ I have completed _____ for the academic year _____ in your college. I require TC & Migration from the Institute for _____ purpose.

So kindly request you to consider this application and issue TC & Migration.

Thanking you,

Yours faithfully,

Student Name and Signature: _____

Clearance Certificate

Sr. No.	Section	Remark	Signature
01	Account		
02	Library		
03	Administrative Office		
04	Alumni Coordinator		

Director's Remark