



# SRI AUROBINDO UNIVERSITY, INDORE (M.P.)

## श्री अरबिन्दो विश्वविद्यालय, इंदौर (म.प्र.)

### APPLICATION FORM FOR ISSUE OF MIGRATION CERTIFICATE

To,  
The Registrar,  
Sri Aurobindo University,  
Indore (M.P.)

(For University Use only)	
Migration No.	
Dispatch No.	
Date:	
Dealing Asst.	

Sir,

I have been a student of Sri Aurobindo University, Indore studying as Regular/Ex Student in the .....  
..... (Institute) and passed the the examination in the month and year .....  
in ..... division. I request you to kindly issue me Migration Certificate.

The necessary fees of Rs. .... has been deposited in University bank account by  
RTGS/NEFT/DD/Cheque (Instrument/Transaction No).....  
of bank..... on dated.....

S.no																									
1.	Full Name in ENGLISH (in Capital Letters only)																								
2.	Full Name in HINDI																								
3.	Father's Name																								
4.	Mother's Name																								
5.	Examination Last (appeared/ passed)										Year					Division									
6.	Marks obtained in last semester/Year										Out of (Total Marks )														
7.	Grand Total (including weightage)										Out of (Total Marks )														
8.	Enrollment No:										Branch:														
9.	Name of Institute/Dept.																								
10.	Student Email ID:																								
	Whatsapp Mobile No.																								

Date: .....

Place: .....

Mobile/Phone No: .....

Your Faithfully,

Signature of Student

### CERTIFICATE TO BE RECORDED BY THE PRINCIPAL/ HEAD OF THE INSTITUTE

Certified that the eligibility for award of Migration Certificate has been checked with the original of the concerned certificates, marks sheets, office records of the institution and found correct. The candidate may be issued the desired certificate.

Signature and Seal of the Principal/ head of Institute

#### Important instructions:

- 1- Migration fees of Rs. .... /- Payable in favor of Registrar, Sri Aurobindo University, Indore via RTGS/NEFT/DD/Banker cheque only.
- 2- Final semester/Year marksheet and T.C. attested by the concerned Principal/ Head of the Institution.

#### Postal Address:

Name		Name	
Address		Address	
	PIN Code:		PIN Code:



**Fee for Migration Certificate**

<b>Sr. No.</b>	<b>Constituent College</b>	<b>Fee</b>
1.	Faculty of Medicine	<b>5,000/-</b>
2.	Faculty of Dentistry	<b>5,000/-</b>
3.	Faculty of Nursing	<b>1,500/-</b>
4.	Faculty of Physiotherapy, Faculty of Allied & Paramedical Sciences	<b>1,500/-</b>
5.	Faculty of Rehabilitation Sciences	<b>1,500/-</b>
6.	Faculty of Journalism & Mass Communication	<b>1,500/-</b>
7.	Faculty of Law	<b>1,500/-</b>

**IMPORTANT INSTRUCTIONS FOR STUDENT APPLYING THE APPLICATION FORM FOR THE MIGRATION CERTIFICATE.**

1. Migration certificate application from duly forwarded by Dean/Principal/Director with signature & seal.
2. Student should mention his name in the application form clearly Hindi & English language.
3. Original fees receipt.
4. Photocopy of transfer certificate / college leaving certificate from respective college.
5. Photocopy marksheet of 10<sup>th</sup> class.
7. Photocopy marksheet of last Sem./Year's marksheet.
8. NOC from respective constituent college.
9. Photocopy of aadhar card (Both side).
10. All documents submitted with the application form must be self-attested.