Application Format for College Transfer

Name of the Candidate	:
Contact/ Mobile No.	:
Name of Parent/Guardian	:
Address of Correspondence	:
Branch	:
Year/Semester	:
University Enrollment	:
Details of DD (As transfer fees in favor of Registrar, BTU)	:
Name of the source institute and University	:
Name of the recipient Institute and University	:
Admission through JEE/Management Quota/	:
Direct Admission or any other exam	
Entrance Exam Rank (Overall)	:

(Signature of the Candidate)

Recommendation of the Source Institution

The institute has no objection to transfer of the candidate Mr/Ms								stud	ent	
of	Semester/year	branch,	from	this	institute.	It is	also	certified	that	no
disciplinary/unfair means case was registered against the student during previous year of										
his/her	studies in the colleg	e/universit	y.							

(Signature of the Head of institute with seal)

Recommendation of the Recipient Institution

I have personally checked that one seat is vacant in the Semester/year of the branch in this institute. Hence, the institution has no objection to the transfer of the candidate to this institute.

(Signature of the Head of Institute with seal)

Recommendation of the Medical Board

The medical board has examined the candidate and fo	ound that	a change of pla	ace			
(from) is necessary for the health of the	candidate.	The parent(s) of	the			
candidate is/ are suffering from one of the disease mentioned by the university.						
This opinion is based on investigations, diagnosis and recommendations of the medical						
hoard (constituted vide order no	dated) as enclosed	ł			

(Signature of the Chairman of the Medical Board)