



# Punyashlok Ahilyadevi Holkar Solapur University, Solapur.



## APPLICATION FOR TRANSFERENCE CERTIFICATE (For External Students )

To Principal,

\_\_\_\_\_  
\_\_\_\_\_  
The Director Board Of Examination & Evaluation,  
Punyashlok Ahilyadevi Holkar Solapur University,  
Solapur - 413 255.

1. Name in Full (Surname)

(First Name)

(Father's / Husband's Name)

2. Sex (M-Male, F-Female)  (PRN Number)

3. Address For Correspondence

4. Permanent Address

5. Email Id \_\_\_\_\_

6. Mobile Number \_\_\_\_\_

### LAST EXAMINATION DETAILS:

7. Name of last exam.  Course Code

8. Month & Year of last exam.    
MM YYYY

9. Examination Seat Number  Result \_\_\_\_\_

10. Class Obtained

11. External Registration Number  
(PRN No.) & Date of Registration

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DD

MM

YYYY

12. Admission seeking for course

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13. Admission seeking for college

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College Code

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14. Affiliated to University College

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15. Send my T.C. to

(College Address with Pincode)

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DD No.

16. T.C. Fee Rs. 200/- has been  
Remitted by Cash/Online Payment/  
Demand Draft No

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DD

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MM

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YYYY

**Note : True copy of the mark sheet of the last Examination and admission receipt / Bonafide of the seeking for course must be attached.**

PLACE:

DATE:

**Signature of the Student**

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