

क्षेत्रीय जैवप्रौद्योगिकी केन्द्र

**REGIONAL CENTRE FOR BIOTECHNOLOGY**

**APPLICATION FOR ISSUANCE OF DEGREE CERTIFICATE**

|  |  |  |  |  |  |  |
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|  | |  | **Reg No.:** | |  | |
| **Name of Student** | | **English**  **(in CAPITAL LETTERS)** | |  | | |
| **Hindi**  **(in Devanagari script)** | |  | | |
| **Academic Programme** | |  | | | | |
| **Specialization (lab)** | |  | **Month & Year of Passing** | | |  |
| **Title of Dissertation:** | | | | | | |
| **Tel/ Mobile No.** |  | | **E-Mail:** | | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Mode of Delivery:** | **in Person** | **by Speed Post** | | | | | | |
| **Address to which the Certificate is to be sent (In India)**  **(in Capital letters)** |  |  | | | | | | |
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|  |  | | | | | | |
|  | **Pin Code:** |  |  |  |  |  |  |

**Place:**

**Date: Signature of the Candidate**

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| --- | --- |
| **For Official Use**    **Verified and Recommended**   * **It is certified that the candidate has cleared all dues.** * **Latest photograph of the candidate is attached.** | **(Affix Passport Size Photograph)** |
| **Verifier Name:**  **Signature:** | **DEAN (ACADEMICS)**  Signature and Stamp |