

Enclosures to the application:

1. The B-Challan or Online Payment Receipt of Prescribed fee.
 2. Photo Copy of the Student's Aadhar Card.
 3. Photo Copy of the Memorandum of Marks.
 4. Photo Copy of the Provisional Certificate.
 5. Soft Copy of Students Pass port size photo (in JPG or JPEG format).
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(To be filled in by the Office of the Controller of Examination, Telangana University, Dichpally, Nizamabad)

The Candidate has fulfilled all the academic requirements for the award of _____

Degree in _____. The candidate has secured _____ class.

Date:

CONTROLLER OF EXAMINATIONS

(To be filled in by the Office of the Registrar, Telangana University, Dichpally, Nizamabad)

1. The award of Degree to the applicant was endorsed by the Academic Senate at its meeting held on _____.
2. The executive Council approved the award of Degree to the applicant at its meeting held on _____.
3. Degree bearing number _____ was awarded to the applicant at the Convocation held on _____.
4. Fee particulars entered in register at page No. _____ on _____.
5. The Degree certificate may be issued.

Date:

REGISTRAR

The Degree Certificate bearing No. _____ is dispatched on _____

Dispatching clerk

IDENTIFICATION CERTIFICATE

(To be signed by the Principal / Secretary of the college concerned)

Full Signature of the Candidate _____

I certify that I know the candidate, who has signed on this certificate in my presence. He/She bears the following Identification Marks:

1. _____
2. _____

Date: _____

Full Signature with
Stamp & Designation

Received the Graduate's pass and Received the _____ Degree certificate.

Full Signature of Candidate _____

TELANGANA UNIVERSITY ALUMNI ASSOCIATION (TUA)

RECEIPT FOR ALUMNI FEE

Alumni Fee Rs. 500/- (Rupees Five Hundred Only) Paid through B-Challan or Online Payment Account Number 31079102875, SBI, TG University Branch, Suddapally, IFSC CODE: SBIN0013804.

B-Challan/Online Payment Journal/UTR No. _____ Date: _____

DETAILS OF ALUMNI MEMBER:

Name of the Student : _____

Course & Year of Passing Examination : _____

H.T. No. : _____

Aadhar Number : _____

Gender (M/F) : _____

Date of Birth : _____

E-mail ID : _____

Address:

H. No. : _____

Village & Mandal : _____

District : _____

State : _____

Pin Code : _____

Contact Number : _____

Receiver Signature