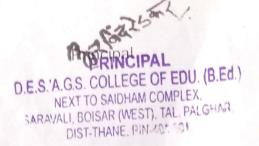
281 / 7/17
paid B. 100/ 390 Deep Education Society's A.G.S. College of Education (B.Ed) Affiliated to University of Mumbai (Opp. GR Engineering Company (MIDC), Next to Saidham Complex, Saravali, Boisar(W). Application for Transfer Certificate Date: 24/7/2017 To. The Principal. (Name and Address of the college last attended) PATUCK-GIALA COLLEGE, 100, Nehru Road, patrick campos, Rystomba particle many valcola Boldge Santacour kast) Agnes. Hiren - Gomes RIGH, Shivner CHS + Proad goliban Santacruz (& Mur-55. From : Name and Address of the Student Sir. As I am seeking to the B.Ed in the A.G.S. College of Education (B.Ed), request you to please arrange to send my Transference Certificate to The Principal, A.G.S. College of Education (B.I.d. Opp. GR Engineering (MIDC), Next to Saidham Complex, Saravali, Boisar (W). Roll No. 38 Particulars 1. Class Attended: T.Y.B.Com 2 Academic Year: 2019 - 2015 Passed 2015 3. Exam. Passed / Failed: 4. Year of Examination 5. Date of Birth : 2 6 1993 Yours Faithf Signature of Stud A.G.S. College of Education (B.Ed)

Date ______
Forwarded with compliments to the Principal

for favor of issue Transference Certificate



I/c Principal





Jessica. A. Boli. R.NO.A | 64, Hanif Charol, Hanuman Tekdi, 10thd, To The Principal, Patrick-Gala College, Nehru Road, Vahola Santacrus (E), Mum-55. Respected Sir/ Madam, I had studied for Blom Course in Division B. in your college during the years 2015-16 and passed in the Academic Year 2016. My Roll No. was _ the Final Year and Examination Seat No. was 1230573 My date of birth is 1317 1995 I have taken admission to the MMS. Course in Thakur Institute of Management Studies & Research, Kandivali (E), Mumbai. Hence, I request you to send my Transference Certificate to the Director of the said Institute. Thanking you, Forwarded with compliments

Thakur Institute of Management Studies & Research

Shyamnarayan Thakur Marg,

Thakur Village,

Kandivali (E), Mumbai - 400 101



Transfer Certificate

Nishad Alkakumari Rameshchand Room No 58,Milind Nagar Vakola Pipeline, Santacruz (east),Mumbai-55

Subject: Request For Transfer Certificate

To.
The Principal
Patuck Gala College of Commerce & Management
Vakola Bridge, Santacruz (E)
Mumbai-400055

I Nishad Alka Kumari Rameshchand Completed T.Y.BCOM in April -2015 from Patuck Gala College of Commerce and Management .Now appearing M.B.A inD.Y..Patil University, Navi Mumbai and need migration certificate

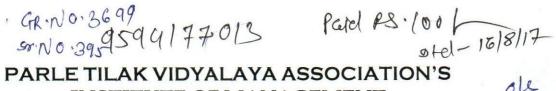
Kind Request to provide me the certificate as soon as possible

Thanks & Regards

Nishad Alka Kumari Rameshchand

I/c Principal

GR.NO.3699 STNO.3959594177013





INSTITUTE OF MANAGEMENT

Chitrakar Ketkar Marg, Vile Parle (East), Mumbai-400 057. Telephone / Telefax 26100100

Website: www.ptvaim.com Email:admin@ptvaim.com

APPLICATION FOR TRANSFERENCE CERTIFICATE

			Date 16 08 2017
The Principal / Direc	ctor		
PATUCK - GA OF COMMERI MANAGEME	CE E		
Sir / Madam,	8		
	and request you		r MMS course in the above e Certificate to the Director
My Roll No. was	8 Ť		during $2015-16$. examination in
Thanking you,			
Yours faithfully, (Signature)			
Student's full name	in Capital:		
KORADIYA Surname	NTSHA First Name	RAMESH Father's Name	SAROJ Mother's Name
Forwarded with cor	npliments to the	Director/Principal PAR	LE TILAK
VIDYALAYA WIDYALAYA WOOD OF COMMONDO WOOD OF	ASSOCIATE I/c Pr Patuck - G:		MG.for favor of compliance.

Santacruz (E), Mumbai-400 055

Teansfer Certificate

Saquib Ahmad Shoeb.

Subject: Request For Transfer Certificale
The Principal,
Patrick yela College of Commerce & Management
Valuable Bridge, Sanlacruz (E)
Munibai-400055

I. Saguib Ahmad Shoeb completed
I'V Blom in March 2012 from Patrick yala Lollege of
Commune and Manage ment. appearing Moom.

Commune and Manage ment. appearing Moom.

University and

in Dr. A.P. J. Abdul Kalam Tells. University and

request to provide Migration Certificate as

request to provide Migration Certificate as

request to possible.

BIR MUMBAI-55 M

192

I/c Principal

Patuck - Gala College of Commerce & Management Santacruz (E), Mumbai-400 055

Thanks & Regards Saquils Ahmadshoch 9/19/2017



paid Ps. 1001

UNIVERSITY OF MUMBAI

Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

Application for Transference Certificate from the last attended College / University Department

From:

College Code: 01

Shri / Smt. /Kum. .

DHAMALE RESHMA RAMESH MANJULA

(surname)

(Own Name)

(father's/husband's Name)

(Mother's Name)

Residential address of

 $SANT\ DYANESHWAR\ NAGAR,\ RNO-07,\ CHWAL\ NO-10\ BANDRA\ (EAST)\ MUMBAI-\ 400051\ ,\ \ 0,\ \ Andheri,$

the student:

Mumbai Suburban, MUMBAI, Maharashtra

Pincode: 400051

Contact no. 8452923049



To

The principal / head of the University Dept

(Full Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE OF COMMERCE AND MANAGEMENT,

NA

Sir / Madam,

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept. I attended the B.COM Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and ((passed/failed/was awarded A.T.K.T.)) at the examination held by the University Dept. / College in June 2016 Examination (Seat No. 1230641)

My Date of Birth is 25/05/1996

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai – 400 098 at the earliest.

Vidyanage

Thanking You,

Verified by

Yours obediently

Date:

(Signature of the Adm. Clerk)

(Student's Signature)

Document printed on Tue Sep 19 2017 19:14:48 GMT+0530 (India Standard Time)

By MUMBAI-55 MM

From:-Name of the Student Mr/Miss Mrs. Muksh Shubhash Shah

Public Night Degree College of Arts & Comm. Hind Nagar, Aaram Society Road., Santacruz (E), MUMBAI - 400 055.

Date: - 11/00/12

To,

The Principal,

Patule Compar College Sulcaciping time bridge Athou soel fordeen (Tan).

Sir,

I am to state that I am seeking admission to the M-Com-L Class Division Roll No. to this College and request that you will be good enough to send my Transference Certificate to the Principal of this College (Attached Xerox copy of Fee Receipt).

I remit herewith Rs. Loo being the fee for Transference Certificate and Rs. ____ as late fee (if charged).

I attended the T. N: 60 MClass, Division C Roll No. in your College during the Ist/IInd Term or both terms of the year 2016 and Hassed/failed at the 2016 class, at College/ Uni. Examination of the year 2016 . My college exam/UNI exam Seat No. was 1231434

MUMBAI-55

Yours faithfully.

I/c Principal

Patuck - Gala College of Signature of the Student).

Commerce & Management Santacruz (E), Mumbai-400 055

P N D C Ref. No. TC/-

MEMBASES

Date: - 110CT 2017

Forward with compliments to the Principal patelebula College

Conden cerse : College for favour of compliance.

PRINCHARIC Night Degree College Hind Nagar, Vakola, Santacruz (E), Mumbai - 400 055.

APPLICATION FOR TRANSFER CERTIFICATE From: Name of the Student Mr./Miss/Mrs. Katkumar Babolal Public Night Degree College Hind Nagar, Vakola, Santacruz (E), Mumbai - 400 055. Date: 10 To, The Principal actuals Comput College Valkala bricelae Netro Josef Sonterne (cast) Mss Sir / Madam, I am to state that I am seeking admission to the M-(om-) class division Roll No. _____ to this college and request that you will be good enough to send my Transference Certificate the Principal of this college (Attached xerox copy of fee Receipt) I remit herewith Rs. _____ being the fee for Transfer Certificate and Rs. _____ as late fee (if charged) I attended the T. V. BCOM class, Division _ C Roll No. _ in your college during the lst / IInd /IIIrd / IVth sem of the year _____ and Passed / failed at the Tiny boom class, at College / University Examination of the year 2015. My college exam / UNI exam Seat No. was 2037076 Yours faithfully, (Signature of the student) I/c Principal Patuck - Gala College of Commerce & Management Santacruz (E), Mumbai-400 055 1 1 OCT 2017 Date: P.N.D.C. Ref. No. TC/-

Forward with compliments to the Principal Datele, Coula College, Compos

Sendeen (Ta &)-M ST college for favour of compliance.

PRIMOLRAL

Public Night Degree College Hind Nagar, Vakola, Santacruz (E).

Mumbai - 400 055.





GR:NO - 4287 68:NO - 408

Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

Application for Transference Certificate from the last attended College / University Department

From:

Shri / Smt. /Kum. .

SHINDE

RUPESH

RAVINDRA

College Code: 01 RUPALI

(Surname)

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

the student:

Residential address of PRIDE OFF VAKOLA; ROOMNO - 501; DATTA MANDIR ROAD; VAKOLA PIPE LINE; SANTACRUZ EAST, 0, Andheri, Mumbai Suburban, MUMBAI, Maharashtra

Pincode: 400055

Contact no. 9619166560

The principal / head of the University Dept

(Full Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE,

NA

Sir / Madam,

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I- M.Com I class in Institute of Distance nd Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept. I attended the B.COM Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded

A.T.K.T.) at the examination held by the University Dept. / College in August 2017 Examination (Seat No. 6238206)

My Date of Birth is 23/02/1994

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

Date:

INSTITUTE OF DISTANCE AND OPEN LEARNING (IDOL) SHANKAR DAYAL SHARMA BHAVAN. VIDYANAGARI, KALINA, SANTACRUZ (E), MUMBAI-400 098.



(Student's Signature)

Document printed on Sat Oct 28 2017 10:35:06 GMT+0530 (India Standard Time)



10/30/2017

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UNIVERSITY OF MUMBAI

Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

Application for Transference Certificate from the last attended College / University Department

From:

Shri / Smt. /Kum. .

RAWAL (Sumame) **AAKASH** (Own Name) SANJAY

(Father's/Husband's Name)

PUSHPA

(Mother's Name)

College Code: 01

the student:

Residential address of 11/394,SHRI KRUPA CHS LTD, NIRMAL NAGAR NEAR POLICE STATION, KHERWADI ROAD,BANDRA EAST, 0, Andheri, Mumbai Suburban, MUMBAI, Maharashtra

Pincode: 400051

Contact no. 9930748602

To,

The principal / head of the University Dept

(Full Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE OF COMMERCE AND MANAGEMENT,

NA

Sir / Madam,

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept. I attended the BACHELOR OF COMMERCE B.COM Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in June 2016 Examination (Seat No. 1231342)

My Date of Birth is 03/04/1995

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

Date: 3110/17

MESTATION OF DISTANCE AND OPEN LEARNING HOOLS VIDYANAGARI, KALINA SANTACRUZ (E), MUMBAI-400 POS

(Student's Signature)

Document printed on Mon Oct 30 2017 11:20:19 GMT+0530 (India Standard Time)

of Com MUMBAI-5

Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

Application for Transference Certificate from the last attended College / University Department

From:

Shri / Smt. /Kum. .

VARMA (Surname) DEEPIKA

SHRAVAN VARMA

College Code: 01 INDRAVATI VARMA

Residential address of the student:

(Own Name) Room No.-1 Panchal Chawl, Vakola Dhobighat, Santacruz(E), 0, Andheri, Mumbai Suburban, Mumbai,

(Father's/Husband's Name)

(Mother's Name)

ON 30. 412 27.

Maharashtra

Pincode: 400055

Contact no. 9619662839

To.

The principal / head of the University Dept

(Full Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE,

Sir / Madam.

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept. I attended the Bachelor Of Commerce Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in August 2017 Examination (Seat No. 6238334)

My Date of Birth is 25/04/1995

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

Date:

I/C DIRECTOR INSTITUTE OF DISTANCE AND OPEN LEARNING (IDOL) DMIVERSITY OF MUMBAI DR. SHANKAR DAYAL SHARMA BHAVAN, VIDYANAGARI, KALINA,

SANTACRUZ (E), MUMBAI-400 P95

(Student's Signature)

Document printed on Sat Nov 18 2017 11:04:16 GMT+0530 (India Standard Time)



Direct Tel No : X-22-26522677 DEPARTMENT OF COMMERCE University of Mumbai 91-22-26543322 University of Mumbai, Vidyanagari Campus, Kalina, 91-22-26543323 Santacruz (East), MUMBAI - 400 098. (INDIA) Date: 3-10-17 KHAN SANA JAMAL ANURAG BUILD 104, 56, NO. 3906 HALLOW PULL KURLE (12) MUMBAI - 70 To: The Principal. UNIVERGITY OF MUMBAT PATUCK GAGA Dear Sir. I beg to state that I am seeking admission to the M.Com. / Ph.D. Class of this Department and have, therefore to request you kindly send my Transference Certificate to the Head University Department of Commerce. attended the B.Com./M.Com. Class in your College ACCOUNTING! during the 1st/2nd term of the academic year 2016 Yours faithfully. No.UD./Com./ 334 /2017 Forwarded with compliments to the Principal College for favour of compliance. Professionsbrand Premoment of Commerce Department bh Dommerce University of Mumbai

mkr



I/c Principal

College Code: 01

Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

STNO-415 2014/15
GR.NO-4089

Vidyanagari, Santacruz (east), Mumbai-400098

Application for Transference Certificate from the last attended College / University Department

From .

Shri / Smt. /Kum. . JARALI

MANOJ

KRUSHANA

TULSA

(Surname)

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

of the student:

Residential address GANESH CHAWL 7 R.NO 129 DR.V. SUBRAMANIUM NAGAR DMELLO COMPD VAKLOA BRIDGE

SANTACRUZ {E} MUMBAI400055, 0, Andheri, Mumbai Suburban, MUMBAI, Maharashtra

Pincode: 400055

Contact no. 7715946332

To.

The principal / head of the University Dept

I Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE OF COMMERCE AND MANGEMENT,

Sir / Madam.

n to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept.

attended the B.com Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in April 2017 Examination (Seat No. 6237529)

My Date of Birth is 15/08/1996

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

INSTITUTE OF DISTANCE AND OPEN LEARNING (1001) UNIVERSITY OF MUMBAL DR SHANKAR DAYAL SHARMA BHAVAN. VIDYANAGARI KALINA SANTACRUZ (E), MUMBAI-ARD POS



(Student's Signature)

Document printed on Tue Oct 03 2017 09:43:40 GMT+0530 (India Standard Time)



58 NO-416 GR. NO - 4093 UNIVERSITY OF MUMBAI

College Code: 01

Institute of Distance and Open Learning

Dr. Shankar Daval Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

Application for Transference Certificate from the last attended College / University Department

From:

PANDURANG

SAVITA

Shri / Smt. /Kum. :

KADAM (Surname)

DEEPIKA (Own Name)

(Father's/Husband's Name)

(Mother's Name)

Residential address of SHIV SHANKAR CHAWL, SHATRI NAGAR. D-MELLOW COMPOUND, VAKOLA, SANTACRUZ(E), MUMBAI 400055, 0, Andheri, Mumbai Suburban, mumbai, Maharashtra

the student:

Pincode: 400055

Contact no. 8652236911

To.

The principal / head of the University Dept

(Full Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE OF COMMERCE AND MANAGEMENT,

NA

Sir / Madam,

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept.

I attended the THIRD YEAR B.COM Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. College in August 2017 Examination (Seat No. 62237553)

My Date of Birth is 10/06/1996

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

Date:

HC DIRECTOR INSTITUTE OF DISTANCE AND OPEN UNIVERSITY OF MUMBAI DR. SHANKAR DAYAL SHARMA VIDYANAGARI. KALINA

SANTACRUZ (E), MUMBALACE

(Student's Signature)

Document printed on Tue Oct 03 2017 11:30:45 GMT+0530 (India Standard Time)



of paid B. 100 7045021772

DEPARTMENT OF COMMERCE University of Mumbai Direct Tel. No.: 91-22-26522677 University of Mumbai, 91-22-26543322 Tel. No. Vidyanagari Campus, Kalina, 91-22-26543323 Santacruz (East), MUMBAI - 400 098. (INDIA) Shailer Afsin Bano Date: 3 10 2017 strinager Kalina Son NO - 417 GR. NO-4251 To: The Principal, patuek college Dear Sir. I beg to state that I am seeking admission to the M.Com. / Ph.D. Class of this Department and have, therefore to request you kindly send my Transference Certificate to the Head University Department of Commerce. attended B.Com./M.Com. Class in your College in the during the 1st/2st term of the academic year Yours faithfully. No.UD./Com./ 334 /2017

Forwarded with compliments to the Principal ___

College for favour of compliance.

mk



Professor and Head University of the Professor and Head

University of Mumbai

I/c Principal

paid B. 100/ 9022030362 University of Mumbai DEPARTMENT OF COMMERCE Direct Tel. No.: 91-22-26522677 University of Mumbai, 91-22-26543322 Vidyanagari Campus, Kalina, 91-22-26543323 Santacruz (East), MUMBAI - 400 098. (INDIA) poolakumasi Gautam Date: 3 10 2017 Sa. No -4180 14-15 gala your College in the

I beg to state that I am seeking admission to the M.Com. / Ph.D. Class of this Department and have, therefore to request you kindly send my Transference Certificate to the Head University Department of Commerce.

attended the B.Com./M.Com. Class Bom during the 1st/2nd term of the academic year

No.UD./Com./ 334 /2017

Forwarded with compliments to the Principal

College for favour of compliance.

Professor and Head UniDepartment of Commerce UniDepartment of Mumbai

freshales

mk

Tel. No.

To:

The Principal,

Dear Sir.



I/c Principal Patuck - Gala College of Commerce & Management

Santacruz (E), Mumbai-400 055



Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

Application for Transference Certificate from the last attended College / University Department

From:

Shri / Smt. /Kum. .

MOMIN

MOHSIN

MUKTAR

(Father's/Husband's Name)

College Code: 01 ZAHIDA

(Mother's Name)

Residential address of

the student:

(Surname) (Own Name) 1B/1006, rehab bldg, cts no.629, AMBEDKAR NAGAR, MAHARASHTRA NAGAR, bandra east mumbai 400051, 0, , Mumbai Suburban, mumbai, Maharashtra

Pincode: 400051

Contact no. 8286777206

The principal / head of the University Dept

(Full Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE OF COMMERCE ARTS SCIENCE TECHNICAL,

NA

Sir / Madam,

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept. I attended the B.COM Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in February 2017 Examination (Seat No. 1003126) My Date of Birth is 01/01/1994

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

Date:

INSTITUTE OF DISTANCE AND OPEN LEARNING (1001) UNIVERSITY OF MUMBAI DR. SHANKAR DAYAL SHARMA BHAVAN. VIDYANAGARI, KALINA, SANTACRUZ (E), MUMBALANO POS



(Student's Signature)

Document printed on Wed Nov 29 2017 21:45:09 GMT+0530 (India Standard Time)



Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

98.NO-421 GR.NO.4176

Vidyanagari, Santacruz (east), Mumbai-400098

Application for Transference Certificate from the last attended College / University Department

From:

Shri / Smt. /Kum. .

MUDGAL (Surname)

NAMRATA (Own Name) KRISHNA

(Father's/Husband's Name)

14-15

KUNJALA

(Mother's Name)

College Code: 01

the student:

Residential address of SHIVKRUPA CHAWL COMITEE TARUN MARATHA MITRA MANDAL DATTA MANDRI ROAD SANTACRUZ E, 0, Andheri, Mumbai Suburban, MUMBAI, Maharashtra

Pincode: 400055

Contact no. 8879847663

To.

The principal / head of the University Dept

(Full Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE,

NA

Sir / Madam,

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept.

I attended the TY B COM Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in April 2017 Examination (Seat No. 6237821)

My Date of Birth is 12/02/1996

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

Date:

INSTITUTE OF DISTANCE AND OPEN LEARNING (IDOL) UNIVERSITY OF MUMBAI DR. SHANKAR DAYAL SHARMA BHAVAN, VIDYANAGARI, KALINA,

SANTACRUZ (E), MUMBAI-400 POS

(Student's Signature)

Document printed on Wed Oct 04 2017 17:22:25 GMT+0530 (India Standard Time)

Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

Application for Transference Certificate from the last attended College / University Department

58:NO-422 GR:NO-4166

From:

Shri / Smt. /Kum. .

MHASKAR (Surname)

DIVESH (Own Name) DINESH

(Father's/Husband's Name)

College Code: 01 DIPIKA

(Mother's Name)

Residential address of the student:

KARTIK CHAWL NEHRU NAGAR V M ROAD NO-5, 0, Andheri, Mumbai Suburban, MUMBAI, Maharashtra Pincode: 400056

Contact no. 8097852053

To,

The principal / head of the University Dept

(Full Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE VAKOLA SANTACRUZ EAST,

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept. I attended the T.Y.B.COM Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in April 2017 Examination (Seat No. 6237781)

My Date of Birth is 27/10/1996

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

Date:

INSTITUTE OF DISTANCE AND OPEN LEARNING (100L) UNIVERSITY OF MUMBAI DR SHANKAR DAYAL SHARMA RHAVAN VIDYANAGARI, KALINA SANTACRUZ (E), MUMBAI-400 098



(Student's Signature)

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Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

7045092718

Part 8-100/
Sor'N b-423

GR.NO-3187

Application for Transference Certificate from the last attended College / University Department

College Code: 01

From:

student:

Shri / Smt. /Kum. .

GUPTA (Surname) PRAKASH (Own Name)

KAMLESH (Father's/Husband's Name) RINKI

(Mother's Name)

Residential address of the KN SUNDARRAO CHAWL JAMBHALI PADA, KALINA SANTACRUZ(EAST) MUMBAI, 0, Andheri, Mumbai

Suburban, MUMBAI, Maharashtra

Pincode: 400029

Contact no. 7666372901

The principal / head of the University Dept

(Full Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE,

Sir / Madam

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept.

I attended the B.COM Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in April 2016 Examination (Seat No. 1012856)

My Date of Birth is 25/02/1995

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination's.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

Date: 12 12 17

INSTITUTE OF DISTANCE AND OPEN LEARNING (1001) UNIVERSITY OF MUMBA SHANKAR DAYAL SHARMA BHAVAN, VIDYANAGARI, KALINA SANTACRUZ (E), MUMBAI-400 099



(Student's Signature)

Document printed on Tue Nov 14 2017 12:17:00 GMT+0530 (India Standard Time)

of Comm

Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400 98

Application for Transference Certificate from the last attended College / University Department

9773969006 Paid B . 100 |-GR'NO-3425

From:

Shri / Smt. /Kum. .

YADAV (Surname) NARENDRA

College Code: 01 CHANDRAVATI

Residential address of the

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

103, MAITRI CHHAYA, APTS MANIPADA, KALINA, 0, Andheri, Mumbai Suburban, MUMBAI,

student:

Maharashtra Pincode: 400098

Contact no. 9773969006

The principal / head of the University Dept

(Full Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE,

Sir / Madam,

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept.

I attended the B.COM Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in March 2017 Examination (Seat No. 1013799)

My Date of Birth is 07/09/1993

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

Date: 13/12/2017

I/C DIRECTOR INSTITUTE OF DISTANCE AND OPEN LEARNING (1001) UNIVERSITY OF MUMBAI DR. SHANKAR DAYAL SHARMA BHAVAN. VIDYANAGARI, KALINA, SANTACRUZ (EI, MUMBAI-ANN NOS



Signature)

Document printed on Tue Nov 14 2017 12:25:11 GMT+0530 (India Standard Time)





Secretary / Principal

PRAKASH DEGREE COLLEGE OF COMMERCE & SCIENCE

R.R. P. Municipal School Building, Shantilal Modi Road, Kandivali (W),

Mumbai - 400 067. Tel.: 2861 9575 / 3095 6001

E-mail: shreeg@vsnl.net

Paid Rs. 100/

Application Form for claiming TRANSFERENCE CERTIFICATE FROM THE COLLEGE LAST ATTENDED. From student's Name: Shri/Kum.: Dubey Neha Yogesh. To The Principal, College Santacruz (E'
(Address) Patuck-Gala Sir, Class in the Prakash Degree College of Commerce, Shantilal Modi Road, Kandivali (W), Mumbai 400 067. I request you to kindly send my TRANSFERENCE CERTIFICATE to the Principal, the said college. I attend the T.Y.Bcom Class, Div. A Roll No. 035 in your college during First & Second Terms of the academic year. 2014-15 Yours faithfully, Neha (Signature of the student) Forwarded with compliments for favour of compliance. The student's date of brith may kindly be supplied. 1) The student, with whom this application is sent has been instructed to pay the amount for 2) transference certificate fees directo your college office. MUMBAI-55 I/c Principal Patuck - Gala College of

Date : _______

Commerce & Management Santacruz (E), Mumbai-400 055

Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

ST:NO-426 GRNO-3618

Vidyanagari, Santacruz (east), Mumbai-400098

Application for Transference Certificate from the last attended College / University Department

College Code: 01

From:

Shri / Smt. /Kum. .

GHAG

GANESH

GOVIND

ANITA

Residential address of the

student:

(Surname)

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

LOKSEVA NAGAR, JIJAMATA MARG, PUMPHOUSE, 0, Andheri, Mumbai Suburban, MUMBAI,

Maharashtra

Pincode: 400093

Contact no. 9594124137

(Full Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE COMMERCE AND MANAGEMENT,

NA

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I- M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept. I attended the TY B.COM Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in . April 2016 Examination (Seat No. 1230718)

My Date of Birth is 28/09/1995

are enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

Date:

I/C DIRECTOR INSTITUTE OF DISTANCE AND OPEN LEARNING HODE UNIVERSITY OF MUMBAI DR. SHANKAR DAYAL SHARMA BHAVAN, VIDYANAGARI, KALINA, SANTACRUZ (E), MUMBAL-400 000



Signature) 9594124137.

(Student's

Document printed on Mon Oct 30 2017 19:33:03 GMT+0530 (India Standard Time)

12/20/2017

UNIVERSITY OF MUMBAI

UNIVERSITY OF MUMBAI

Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

Application for Transference Certificate from the last attended College / University Department

Oq-10

Ole

OR

NO . 427

Application for Transference Certificate from the last attended College / University Department

From:

Shri / Smt. /Kum. .

SHAIKH

HASMUDDIN

ISHA SHAIKH

College Code: 01 JAINAB SHAIKH

Residential address of the

(Surname) Room No.2, Sirajuddin Chawl, Masrani State, Halav Pool, , 0, Kurla, Mumbai Suburban, Kurla (West),

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

Mumbai, Maharashtra

student:

Pincode: 400070

Contact no. 9867480737

The principal / head of the University Dept

(Full Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE OF COMMERCE AND MANAGEMENT,

Sir / Madam,

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I-M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept.

I attended the B.Com Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in November 2012 Examination (Seat No. 2496)

My Date of Birth is 10/01/1991

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

(Student's

Signature)

Date:

I/C DIRECTOR INSTITUTE OF DISTANCE AND OPEN LEARNING (IOOL) UNIVERSITY OF MUMBAI DR. SHANKAR DAYAL SHARMA BHAVAN, VIDYANAGARI, KAUNA, SANTACRUZ (EI, MUMBAI-400 POS.

Document printed on Wed Dec 20 2017 22:19:46 GMT+0530 (India Standard Time)

Comm

I/c Principal Patuck - Gala College of Commerce & Management

Santacruz (E), Mumbai-400 055





Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

Application for Transference Certificate from the last attended College / University Department

17/02/18 GANO-1580 09-10

From:

Shri / Smt. /Kum. .

ANSARI

MOHD SARFARAZ

AKBAR HUSSAIN

REHMAT

Residential address of

the student:

(Surname) (Own Name) (Father's/Husband's Name)

(Mother's Name)

College Code: 01

ROOM NO.147/2 YAKUB CHAWL 4th ROAD GOLIBAR SANTACRUZ EAST MUMBAI 400055, 0, Mumbai, Mumbai City, MUMBAI, Maharashtra

Pincode: 400055

Contact no. 8779794758

To.

The principal / head of the University Dept

(Full Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE OF COMMERCE AND MANAGEMENT,

NA

Sir / Madam,

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept.

I attended the B.COM Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in March 2012 Examination (Seat No. 11309)

My Date of Birth is 25/04/1990

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

Date:

UC DIRECTOR INSTITUTE OF DISTANCE AND OPEN LEARNING (IDOL) UNIVERSITY OF MUMBAI HANKAR DAVAL SHARMA BHAVAN, VIOYANAGARI, KAUNA, SANTACRUZ (E), MUMBALADO DOS

(Student's Signature)

Document printed on Thu Nov 23 2017 12:16:52 GMT+0530 (India Standard Time)



9/28/2017

Parol Ps UNIVERSITY OF MUMBAI Institute of Distance and Open Learning Dr. Shankar Daval Sharma Bhavan.

58.NO-429 GR.NO-3586

8879180689

From:

Shri / Smt. /Kum. .

BENDKHALE

(Surname)

SUMIT (Own Name)

GAJANAN

Vidyanagari, Santacruz (east), Mumbai-400098

Application for Transference Certificate from the last attended College / University Department

(Father's/Husband's Name)

UJWALA

(Mother's Name) Residential address of the D2/4, P AND T COLONY NEHARU ROAD, VAKOLA MASJID SANTACRUZ (EAST), 0, Andheri, Mumbai

College Code: 01

student:

Suburban, MUMBAI, Maharashtra Pincode: 400055

Contact no. 9082244779

The principal / head of the University Dept

(Full Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE OF COMMERCE,

NA

Sir / Madam,

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept.

I attended the B.COM Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in April 2016 Examination (Seat No. 1230549)

My Date of Birth is 17/03/1996

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

Date:

INSTITUTE OF DISTANCE AND OPEN LEARNING (LOOL) UNIVERSITY OF MUMBAI DR. SHANKAR DAYAL SHARMA BHAVAN. VIDYANAGARI, KAUNA SANTACRUZ (E), MUMBAI-400 POS



(Student's Signature)

Document printed on Sat Oct 28 2017 19:58:54 GMT+0530 (India Standard Time)



11/15/2017

UNIVERSITY OF MUMBAI

Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

S8'NO-430 GR'NO-4157

Application for Transference Certificate from the last attended College / University Department

From:

Shri / Smt. /Kum. .

Residential address of the

MAINKAR

PRIYANKA

RAJENDRA

College Code: 01
RASIKA

(Surname)

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

r/n355 1/8, natraj chawl JAWAHAR NAGAR, 0, Andheri, Mumbai Suburban, MUMBAI,

udent: Maharashtra

Pincode: 400051

Contact no. 9867153101

e principal / head of the University Dept

rull Name and Address of the last attended College / University Dept.): PATUCK COLLEGE,

NA

Sir / Madam,

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I- M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept.

Attended the BCOM Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in April 2017 Examination (Seat No. 6237722)

My Date of Birth is 25/10/1986

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

Date

I/C DIRECTOR
INSTITUTE OF DISTANCE AND OPEN LEARNING (LOOL)
UNIVERSITY OF MUMBAI

DR. SHANKAR DAYAL SHARMA BHAYAN,
VIDYANAGARI, KALINA,
SANTACRUZ (E), MUMBAI-400 095



(Student's Signature)

Document printed on Wed Nov 15 2017 16:29:35 GMT+0530 (India Standard Time)

MUMBAI-55 M

UNIVERSITY OF MUMBAI

Solve Distance and Open Learning

Dr. Shankar Dayal Shankar Daya

Paid PR. 100 /25/118.

Application for Transference Certificate from the last attended College / University Department

From:

Shri / Smt. /Kum. .

PAWAR (Surname)

NITESH (Own Name) SHANKAR

(Father's/Husband's Name)

VAMAL

(Mother's Name)

College Code: 01

Residential address of the student:

ROOM NO-5 JAI SEVALAL NAGAR RADHAGRAM DHOBIGHAT VAKOLA BRIDGE SANTACRUZ EAST, 0, Mumbai, Mumbai City, MUMBAI, Maharashtra

Pincode: 400055

Contact no. 9967148870

The principal / head of the University Dept

(Full Name and Address of the last attended College / University Dept.): PATUCK DEGREE COLLEGE,

Sir / Madam,

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept. I attended the BCOM Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in April 2017 Examination (Seat No. 6237950)

My Date of Birth is 15/07/1996

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

I/C DIRECTOR INSTITUTE OF DISTANCE AND OPEN LEARNING (1001) UNIVERSITY OF MUMBAI DR. SHANKAR DAYAL SHARMA BHAVAN, VIDYANAGARI, KALINA,

SANTACRUZ (E), MUMBAI-400 095

Student's Signature)

Document printed on Fri Jan 05 2018 18:05:02 GMT+0530 (India Standard Time)

Nobile- 9967148870

idoloa.digitaluniversity.ac/ApplicationStatus/PrintApplication UNIVERSITY OF MUMBAI Institute of Distance and Open Learning Dr. Shankar Dayal Sharma Bhavan, Vidyanagari, Santacruz (east), Mumbai-400098 Application for Transference Certificate from the last attended College / University Department

From:

Shri / Smt. / Kum. . JAIN

(Surname)

NEELAM

BHAGWATILAL

College Code: 01

(Own Name) (Father's/Husband's Name)

MEENA (Mother's Name)

Residential address

of the student:

GROUND FLOOR, KAMAL NIWAS NEHRU ROAD, VAKOLA BRIDGE SANTACRUZ (EAST), 0, Andheri, Mumbai Suburban, MUMBAI, Maharashtra

Pincode: 400055

Contact no. 9967274195

To,

The principal / head of the University Dept

(Full Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE OF COMMERCE AND MANAGEMENT,

NA

Sir / Madam,

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I- M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept.

I attended the B.COM Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in August 2017 Examination (Seat No. 6237508)

My Date of Birth is 21/12/1995

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s. I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

Date:

Signature)

Student's

Document printed on Sat Oct 21 2017 10:11:47 GMT+0530 (India Standard Time)

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Patuck - Gala College of Commerce & Management Santacruz (E), Mumbai-400 055

62

50. NO, 198. 8-118 NO, 198. 100, 100, 100, 100 8-00

Shaikh Lana Mohd Athlague Gat no. 696, Kalyani Sharp Company, Silver nest Society, Koregaon bhima, Pune, Maharastra-Pin code: 412216

Sub: - for Transfer certificate.

To,
The Principle,
Patuck gala college of commerce &
Management.

I Shaikh sana completed S. Y. B. coms
in the year Mar-2009 and T. Y. B. com in the
year April-2010 from Patuck Gala College.
Year April-2010 from Patuck Gala College.
Now I appear for B. ed in Pune.
Now I appear for B. ed in Pune.

They need migration certificate. So, I request you to Please give me a fever.

The name of college I appear for Bied is Jai Shrivam college of education (Bied), Shikrapur, Taluka Shriur, Pune-412208

Bee MUMBAI-55 M

I/c Principal
Patuck - Gala College of
Commerce & Management
Santacruz (E), Mumbai-400 055

yours faithfully,

8/csu

paid Ps. 1001

9870484675

Lakamshi Napoo Road, Matunga, Mumbai - 400019

	Date: 24/03/201
From: (Student's Full Name & Address)	
YADAV RAVINDRA BAZJNATH M	IUNISARADEUL
TO:	
The Principal	
PATHUCK CIALA COLLAGE OF COM	merce and Management.
SANTACRUZ East.	
Dear Sir,	
I am seeking admission to the MMM/MFI Prin.L.N.Welingkar Institute of Management Development my Transference Certificate to the Director of thi I attended the T.J.B.com Class in your College during 20 - 20 & Passed at Examination of	pment & Research & request you to s Institute the First & Second Term of the year 520'
~~ · · · · · · · · · · · · · · · · · ·	1.
University Examination No. <u>48674</u>	ear 2013
	Yours faithfully (Signature of Student)
Forwarded with compliments to the Principal,	Yours faithfully Action (Signature of Student) hulle Collection

Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

9967/42872 9082440038

Vidyanagari, Santacruz (east), Mumbai-400098

Application for Transference Certificate from the last attended College / University Department

From:

Shri / Smt. /Kum. .

ANSARI

MOHD PARRVEZ

AKBAR HUSSAIN

College Code: 01 REHMATBEE

(Surname)

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

Residential address of the student:

YAKUB CHAWL 4th ROAD GOLIBAR SANTACRUZ EAST MUMBAI, 0, , Mumbai Suburban, MUMBAI, Maharashtra

Pincode: 400055

Contact no. 9702283670

To.

The principal / head of the University Dept

(Full Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE OF COMMERCE AND MANAGEMENT,

NA

Sir / Madam.

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College / University Dept.

l'attended the B.COM Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in March 2012 Examination (Seat No. 11307)

My Date of Birth is 25/04/1990

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

Date:

INSTITUTE OF DISTANCE AND OPEN LEARNING (1001) UNIVERSITY OF MUMBAI OR, SHANKAR DAYAL SHARMA BHAVAN, VIDYANAGARI, KALINA, SANTACRUZ (D), MUMBALADO POS

(Student's Signature)

Document printed on Wed Nov 29 2017 11:57:00 GMT+0530 (India Standard Time)

of Comm

30.NO-437 UNIVERSITY OF MUMBAI

GR.NO:3650

Dr. Shortson, Dr. Shortson,

Vidyanagari, Santaeruz (east), Mumbai-400098

Application for Transference Certificate from the last attended College / University Department

College Code: 01

paid

From: Shri / Smt. /Kum. .

JADHAV

AMOL

BHALCHANDRA

BHARTI

100

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

Residential address of the

student:

HANUMAN CHOWK MAHAKALI SHIVSHANKAR NAGAR NEW AGRIPADA, 0, Andheri, Mumbai Suburban, mumbai, Maharashtra

Pincode: 400055

Contact no. 9224237170

The principal / head of the University Dept

(Full Name and Address of the last attended Gollege / University Dept.): PATUCK GALA COLLEGE OF COMMERCE AND MANAGEMENT,

NA

I am to state that I have taken provisional admission to the M.Com-Distance Education-2017 Pattern-M.Com I-M.Com I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated, Issued to me by the College / University Dept.

I attended the T.Y.B.COM Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in October 2016 Examination (Seat No. 1003066)

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai – 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

Date:

VO.DIRECTOR THE PROTECTION OF THE PROTECTI -UNIVERSITY OF MUMBAI DR SHANKAR BATAL SHAHMA BHOVAN.

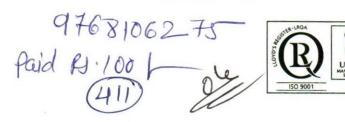
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Signature)

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Affiliated to University of Mumbai (Institute No.: 3359)

Sasmira, Sasmira Marg, Worli, Mumbai - 400 030, INDIA. • Tel.: +91-22-2493 2047 • Fax: +91-22-2492 5275 • Email: simsr@simsr.edu.in • Web: www.simsr.sasmira.org

SIMSR/Transfer/ 78 /2017-18

Date: - 21 | 08 | 2017

To,					
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PATI	UCK	GALA	Col	LEGE	
OF	Co	MME	RCE	AND	
MAI	VAC	MENI	T		
5	ANIT	KRUZE	(E)		

Sub: Transfer Certificate

Thanking you,

Yours Truly,

Arry

Dr. Amit Oak

Director

APO/SUK





I/c Principal
Patuck - Gala College of
Commerce & Management
Santacruz (E), Mumbai-400 055

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SASMIRA'S EDUCATION & TRAINING PROGRAM Approved by : MSBTE & MSBVE

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05 July 2017.

Sub- letter to university for Transfer complicate

of commy Managene

To,

Sontacruz (E)

SIT, & passed the B.com (Borker) of Irsome) In

the year 2013 as a student of Potuck Gold College of

Comm of Managers. | Gimm faso Descri Poll Mo-1700

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Karidas Sonstrin university and is Conducted

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I/c Principal

Patrick. Gala College of

Patuck - Gala College of Commerce & Management Santacruz (E), Mumbai-400 055 Gmm Desy 9430208212 Se look Windy

Application for Transfer/Leaving Certificate.

From: Name: LALI	7 A	GAWA	
Address: 15/	_	AR.	,
Date: 11	10/50 y(m)	19 (7)	6000 - 1AS

To
The Principal,
PATUCK GALA COLLEGE
SANTA (RUZ
MUMBA)

Subject: Request to Issue Transfer/ Leaving Certificate.

Respected Sir,

I LALIT A GAWADE was bonafied student studying in RMS/B.A/B.Com/B.Sc/B.E/BB) Diploma in your reputed college during the period from 2014 to 2013 and have passed the final examination 78B In the month MARCH & Year 2013.

Now, I have taken the admission to the <u>MMS</u> course in the academic year 2017-2018 at "Kohinoor Business School, Kohinoor Education Complex, Kirol Road, Vidyavihar/Kurla(West), Mumbai-400070, which is affiliated to the University of Mumbai and approved by AICTE and DTE.

I am sending herewith attested photocopies of statement of mark sheet for final year for your further necessary action in the matter.

I am also ready to pay the charges if any for issuing my Transfer/Leaving Certificate, if so kindly let me know so that I will arrange to send it to your college by cash or DD. Kindly arrange to send my Transfer/Leaving Certificate at my above Address at an early date, as I am urgently need of the same for the purpose of Completion process of my admission.

Phanking You
Yours Faithfully

(Student's Signature)

Enclosing: -

Dear Sir/Madam,

I/c Principal
Patuck - Gala College of
Commerce & Management
Samacruz (E), Mumbai-400 055

This application is hereby forwarded with compliments for necessary action. Kindly issue the Transfer/Leaving Certificate to the candidate at the earliest so as to confirm his/her admission to our Institute.

Dr. A. A. Attarwala Director In-charge

Kohinoor Business School ,Kohinoor Education Complex,

Kirol Road, Vidyavihar/Kurla(West), Mumbai 400070. Tel:-022-67887777

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UNIVERSITY OF MUMBAI

8879397985

Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

mondary 11-12 GR.NO-3044 53 ST.NO-414

College Code: 01

Application for Transference Certificate from the last attended College / University Department

From:

Shri / Smt. /Kum. .

MOHITE

(Surname)

SHEETAL (Own Name) **SHRIDHAR**

(Father's/Husband's Name)

(Mother's Name)

SANGEETA

of the student:

Residential address Pincode: 400054

ROOM NO -112 OMKAR SUDHAR SAMITI GAZDHAR BANDH OPP SONAL BUILDING SANTACRUZ WEST MUMBAI, 0, Andheri, Mumbai Suburban, Mumbai, Maharashtra

Contact no. 9223496231

To.

The principal / head of the University Dept

(Full Name and Address of the last attended College / University Dept.): PATUCK GALA COLLEGE OF COMMERCE AND MANAGEMENT,

Sir / Madam,

I am to state that I have taken provisional admission to the PGDFM(Revised)-Distance Education-2017 Pattern-PGDFM-PGDFM Semester-I class in Institute of Distance and Open Learning of the University of Mumbai on the basis of the No Objection Certificate dated Issued to me by the College /

I attended the Banking and insurance Class (Roll No. NA) during the First/Second Terms of the Academic year NA at your College and (passed/failed/was awarded A.T.K.T.) at the examination held by the University Dept. / College in November 2014 Examination (Seat No. 1105) My Date of Birth is 15/10/1993

I am enclosing the attested Xerox copy of the mark-sheets of the above mentioned examination/s.

I am to request to sent my Transference Certificate directly to the Director, Institute of Distance and Open Learning, University of Mumbai, Vidyanagari, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking You,

Verified by

Yours obediently

Date:

INSTITUTE OF DISTANCE AND OPEN LEARNING HOOLS UNIVERSITY OF MUMBAI DR. SHANKAR DAYAL SHARMA BHAVAN. VIDYANAGARI, KALINA SANTACRUZ (EI, MUMBAI-400 099



(Student's Signature)

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