

RS-100  
Paid

SR. NO. 44204  
GR. NO. 3715

14

10

Student's Name: LLOYD MENDONCA

Address: SATTAR CHAWL R.N1

BEHIND KALINA MASSIO

KALINA SANTACRUZ EAST

Date:

To,

The Principal,

PATUCK GALA COLLEGE

**Sub: Issue of Transference Certificate**

Respected Sir,

I, the undersigned, LLOYD MENDONCA have completed my graduation/ post-graduation in B.COM from your College/ Institute in the year 2016.

I was studying in your College/ Institute from 2013 to 2016 for the purpose.

I have now joined DBIT – MMS for MMS course, for further studies.

The Institute needs Transference Certificate from the last College/ Institute attended by me. I am submitting my application through the Institute with a request to send my Transference Certificate to the Institute at the earliest.

Thanking you,

Yours faithfully,

Signature

Forwarded with compliments to :

The Principal/Director : For information and necessary action

Don Bosco Institute of Technology-MMS

Premier Automobile Road, Kurla (West)

Mumbai 400 070

*Mend*

I/c Principal

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

*[Signature]*

DEAN

Don Bosco Institute of Technology MMS  
Premier Automobiles Road,  
Kurla (W), Mumbai-400 070



RS. 100/- 14-15 (443)

**Bombay Suburban Art & Craft Education Society's  
Sheila Raheja School of Business Management & Research**  
Raheja Education Complex, Kher Nagar, Opp Chhatrapati Shivaji Ground,  
Bandra (East), Mumbai - 400 051. [www.srbs.edu.in](http://www.srbs.edu.in)  
Telephone No.: (022) 61966640 / 61966666.

Date: 1/8/18

APPLICATION FOR TRANSFERENCE CERTIFICATE

From:-

Mr. Mrs. Rahul Gupta  
Bhori Pandey Chawl, B.No. 2  
Shantikul Compound, Jeevachar Nagar,  
Kher (E) Mumbai (SI)

9987964140

To:-

The Principal,  
PATUCK - GALA COLLEGE  
of Commerce & Management

Sir,

I was a student of your college for the B.com degree during the academic year 2017  
(Roll No. \_\_\_\_\_) and passed the said degree examination held by the University of Mumbai in  
April 2017 (Seat No. 625746).

I have during this academic year i.e. (2018-2020), sought admission for the MMS (Masters in Management Studies) Two year full time course of the University of Mumbai at the Sheila Raheja School of Business Management & Research Bandra (E), Mumbai.

I request you that my Transference Certificate be sent to the Director, Sheila Raheja School of Business Management & Research Raheja Education Complex, Kher Nagar, Opp. Chhatrapati Shivaji Ground, Bandra (East), Mumbai - 400051 at an early date.

Thanking you,

Yours obediently,

Rahul Gupta

Name of the Student: - Rahul Gupta Gyanchand.

No. SRBS/ / 2018.

Date: - \_\_\_\_\_

Forwarded with compliments to The Principal, \_\_\_\_\_ for favour of early compliance

He /She is also requested to intimate the date of birth of the candidates for our information.

Vijay Wagh  
Dr. Vijay Wagh  
Director



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

RS: 100 Paid  
OK  
SP. No. 06

UNIVERSITY OF MUMBAI

GARWARE INSTITUTE OF CAREER EDUCATION AND DEVELOPMENT

APPLICATION FOR TRANSFER CERTIFICATE

I/ Smt. / Shri. / Kum Nambiar Shruti Radhakrishnan  
(Surname) (Name) (Middle Name)

Residential address of the student: 202, Malevadi Privilage, Panvel  
Matheran Road, New Panvel - 410 206

The Principal / Director / Head of the Department,

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sir / Madam,

I am to state that I am seeking admission to the ~~Master/Bachelor/~~ <sup>Diploma</sup> course in Management in the Garware Institute of Career Education and Development. I am to request you to send my transfer certificate to the Director, Garware Institute of Career Education and Development, University of Mumbai, Kalina Campus, Santacruz ( E), Mumbai – 400 098.

I attend the Bcom course (Div \_\_\_\_\_ Roll No. \_\_\_\_\_) during the March term/s of 2013 in your college / Institute / Department and passed/ failed at the examination held by the University in April / October, of 2013 ( Exam Seat No. 17977 )

P. S. S.  
Director



Yours faithfully

Shruti

(Student's Signature)

cut here

1. Name of the Student: Shruti Radhakrishnan Nambiar
2. Admitted to (GICED & Course): Management (BPGDM)
3. Please send this counterpart along with Transfer Certificate.



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

23

Sir M. Visvesvaraya Institute of Management Studies & Research (SVIMS)

Plot.No:117, Road No.7-A, Wadala (w) Mumbai- 400 031.

Tel: 022-24180560

AS 100 paid  
SR No: 05

12/13

Date:- 08/08/2018

C-16

Ref.No:-SVIMS/O/18-19/995

To,  
The Principal,  
Patuck gala College  
Commerce & Management  
Santacruz (E)

**Sub: - Transfer Certificate.**

Sir/Madam,

Mr./Miss Shaikh Mohd Arshad who was a student in your college perusing PGDM degree course in the year 2018 has taken admission in our Institute for MMS/PGDM course.

Kindly issue the necessary transfer certificate to complete the requisite University formalities.

Thanking you,

Yours truly,

*[Handwritten Signature]*  
Aug 08, 2018

**Dr. Purshottam Patil**  
Director

Sir M. Visvesvaraya Institute of Management Studies & Research



*[Handwritten Signature]*

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

8/14/2018

AS-100

*ole* SR.No.8

17-18

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 : 279  
 Shri / Smt. /Kum. . **VISHWAKARMA** **BABITA** **CHANRAKESH** **LALTI DEVI**  
 (Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)  
 Residential address of the student: **19, subramnium nagar D'mello compound, dhobhi ghat datta mandir road vakola bridge , 0, Andheri, Mumbai Suburban, mumbai, Maharashtra**  
 Pincode: **400055** Contact no. **8976804190**

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-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 **July 2018** Examination (Seat No. **3075264** )

**My Date of Birth is 13/09/1997**

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:

*H. H. H. H.*  
**I/C DIRECTOR**  
**INSTITUTE OF DISTANCE AND OPEN LEARNING (IDOL)**  
**UNIVERSITY OF MUMBAI**  
**DR. SHANKAR DAYAL SHARMA BHAVAN,**  
**VIDYANAGARI, KALUNA,**  
**SANTACRUZ (E), MUMBAI-400 098.**



*babita*  
 (Student's Signature)

Document printed on Tue Aug 14 2018 16:15:08 GMT+0530 (India Standard Time)



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

RS-100

**UNIVERSITY OF MUMBAI**  
**Institute of Distance and Open Learning**

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

*ole*

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

From : College Code : 279  
 Shri / Smt. / Kum. . **VARMA** **ANTIMA** **RAJNARAYAN** **SHAMA**  
 (Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)  
 Residential address of the student: **baburam dubey chwal khandwala compound datta mandir road vakola bridge , 0, Andheri, Mumbai**  
**Suburban, mumbai, Maharashtra**  
 Pincode: 400055 Contact no. 9769469739

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-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 **July 2018** Examination (Seat No. **3075247** )

**My Date of Birth is 12/07/1997**

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:

*H. G. G. G.*  
**I/C DIRECTOR**  
**INSTITUTE OF DISTANCE AND OPEN LEARNING (DOOL)**  
**UNIVERSITY OF MUMBAI**  
**DR. SHANKAR DAYAL SHARMA BHAVAN,**  
**VIDYANAGARI, KALINA,**  
**SANTACRUZ (E), MUMBAI-400 098.**



*M. G. G.*  
 (Student's Signature)

Document printed on Tue Aug 14 2018 17:14:32 GMT+0530 (India Standard Time)



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

8/20/2018.

Sr. No. 10

ol R.No-143

UNIVERSITY OF MUMBAI

Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

paid Rs. 100/-

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

From :

College Code : 279

Shri / Smt. /Kum. .	<b>APISHTE</b>	<b>SONAL</b>	<b>SANTOSH</b>	<b>SANCHITA</b>
	(Surname)	(Own Name)	(Father's/Husband's Name)	(Mother's Name)
Residential address of the student:	<b>RAJUBHAI CHAWL NO. 3 ROOM NO. 5 DOULAT SOCIETY PATEL NAGAR GOLIBAR NAKA SANTACRUZ EAST , 0, Andheri, Mumbai Suburban, SANTACRUZ EAST, Maharashtra</b>			
	Pincode: <b>400055</b>	Contact no. <b>8657393944</b>		

To,  
The principal / head of the University Dept  
(Full 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-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 2018** Examination (Seat No. **3073** )

**My Date of Birth is 28/08/1997**

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:

*f. H. ...*  
**I/C DIRECTOR**  
INSTITUTE OF DISTANCE AND OPEN LEARNING (DOOL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098



*[Signature]*  
(Student's Signature)

Document printed on Mon Aug 20 2018 13:52:09 GMT+0530 (India Standard Time)



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

RS.160 paid

ok  
Sr No. 11 2016-17

**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 : 279

Shri / Smt. /Kum. .      **BANO**                      **INSIYA**                      **HASAN ALI**                      **KANEEZ**  
(Surname)                      (Own Name)                      (Father's/Husband's Name)                      (Mother's Name)

Residential address of the student:      Dauri nagar Gate no.03 murge wali chawl Ahemadabad road santacruz (E) Mumbai , 0, Andheri, Mumbai Suburban, Mumbai, Maharashtra

Pincode: 400055      Contact no. 8424907085

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-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. 6237160 )

My Date of Birth is 13/03/1995

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:



Document printed on Mon Aug 20 2018 21:39:32 GMT+0530 (IST)



*Meeta*  
*Prusya*

(Student's Signature)

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



25/2018

Paid Rs-100 ✓

30<sup>th</sup> Aug, 18.

9892013147 02

GR. NO. 3054

Sr. NO. 13

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: 279
Shri / Smt. / Kum.	<b>MALLAH</b>	<b>DEEPIKA</b>	<b>GOPALPRASAD</b>	<b>BADAMIDEVI</b>
	(Surname)	(Own Name)	(Father's/Husband's Name)	(Mother's Name)
Residential address of the student:	<b>ROOM NO.6, SUPARIWALA CHAWL P.M ROAD, KHOTWADI SANTACRUZ(WEST), MUMBAI-400054, 0, Andheri, Mumbai Suburban, MUMBAI, Maharashtra</b>			
	Pincode: 400054	Contact no. 8286525634		

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-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 2014** Examination (Seat No. **15498**)

My Date of Birth is **10/04/1994**

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:

*Shankar*  
**I/C DIRECTOR**  
 INSTITUTE OF DISTANCE AND OPEN LEARNING (DOOL)  
 UNIVERSITY OF MUMBAI  
 DR. SHANKAR DAYAL SHARMA BHAVAN,  
 VIDYANAGARI, KALINA,  
 SANTACRUZ (E), MUMBAI-400 098



*Devi*  
 (Student's  
 Signature)

Document printed on Sat Aug 25 2018 15:15:49 GMT+0530 (India Standard Time)



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

paid Rs. 100 / -

UNIVERSITY OF MUMBAI  
Institute of Distance and Open Learning  
Dr. Shankar Dayal Sharma Bhavan,  
Vidyamagari, Santacruz (east), Mumbai-400098

OL  
GR. NO. 1297  
SR. NO. 14

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

From				College Code : 279
Shri / Smt. / Kum.	SILARMA	NITIN	ASHOK	NIRMALA
	(Surname)	(Own Name)	(Father's/Husband's Name)	(Mother's Name)
Residential address of the student	ROOM NO- 21 CHAWL NO.3 SHIV KRUPA MITRA MADAL GEN A K V MARG NEAR GURUKUL VIDYALAYA JULI AUNTY COMPOUND SANTOSH NAGAR GOREGAON EAST . 0, Boriwali, Mumbai Suburban, MUMBAI, Maharashtra			
	Pincode: 400065	Contact no. 9773543565		

To:  
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-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 **July 2011** Examination (Seat No. **25628** ).  
My Date of Birth is **25/12/1990**  
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, Vidyamagari, Santacruz (East), Mumbai – 400 098 at the earliest.

Thanking You.

Verified by

Yours obediently

Date:

*Approved*  
THE DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN  
VIDYAMAGARI, SANTACRUZ (E), MUMBAI-400098



*[Signature]*  
(Student's Signature)

Document printed on Mon Aug 27 2018 19:51:43 GMT+0530 (India Standard Time)



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

## 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 : 279

Shri / Smt. / Kum. .

SINGH

ABHISHEK

RAJENDRAPRASAD

URMILA

(Surname)

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

Residential address of  
the student:OPP. MOON ROCK BLDG, 338/13 HAJI ISLAM CHAWL GOAWALA ESTATE PIPE LINE ROAD , 0, Kuria,  
Mumbai Suburban, MUMBAI, Maharashtra

Pincode: 400070

Contact no. 9029586553

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-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 **TYB 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 2018** Examination (Seat No. 3075115 )

My Date of Birth is 05/11/1994

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: 31/09/2018

*H. K. Sharma*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (DOOL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098.



*Abhishek*  
(Student's  
Signature)

Document printed on Thu Aug 30 2018 17:12:26 GMT+0530 (India Standard Time)



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

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. . ANSARI MOHAMMED SHAKIB MOHAMMED AKRAM RABIYA  
(Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)  
College Code : 279  
Residential address of the student: ROOM NO 2 CHAWL NO 1 GURUDATT NAGAR VINOBA BHAVE NAGAR , 0, Kurla, Mumbai Suburban, MUMBAI, Maharashtra  
Pincode: 400070 Contact no. 8898356966

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-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 **BACHELORS 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 **July 2018** Examination (Seat No. 3073983 )

**My Date of Birth is 03/08/1997**

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:

*Horwade*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (DOO)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098



*Shakib*

(Student's Signature)

Document printed on Thu Aug 30 2018 18:23:58 GMT+0530 (India Standard Time)



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

Paid Rs. 100/- *o/c*



# SIES COLLEGE OF COMMERCE & ECONOMICS

NAAC Re-accredited "A" Grade, ISO 9001:2008 Certified  
SION (EAST), MUMBAI - 400 022.

## APPLICATION FORM FOR TRANSFERENCE CERTIFICATE

From,

Shaikh Mehزاب Meer Hasan,  
K-16 B.M.C colony Match  
Factory lane Kurla(w)  
Mumbai - 400070.

Full Name & Address of the student

To,

The Principal,

Patuck - Gala College  
of commerce & management  
Vakola bridge, Santacruz  
(E), Mum - 400055.

Name & Full address of the college last attended

Sir,

I am seeking admission to the SIES College of Commerce & Economics in the M.com (Part-I) class and request you to be kind enough to send my Transference Certificate to the Principal of this college. My latest academic record in your college is as under :

1. Full name : Shaikh Mehزاب banu Meer Hasan.
2. Class T.Y.B.com. Div. A Roll No. 46. Academic year 2016-17
3. Last Examination for which application was submitted: \_\_\_\_\_
4. Month & Year of the Exam : April - 2016-17
5. Seat number of the Exam : 6238124.
6. Result at the Exam : Successful.
7. Subjects offered at the Exam : Com, ECO, F.A, Cost acc, AUD, Taxes, II.



*Accountancy.*  
M.com (Part-I)

*M. J.*

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

ok  
RS-100 Paid  
T.C. No-20

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. .

KHAN

NIDA

MOHDFAROOQ

ABIDA

College Code : 279

(Surname)

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

Residential address of the student:

21 B 304 KAPADIA NAGAR CST ROAD KURLA WEST MUMBAI-400070 , 0, Kurla, Mumbai Suburban, MUMBAI, Maharashtra

Pincode: 400070

Contact no. 9004319264

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-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 **BACHELORS IF 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 **April 2018** Examination (Seat No. **3074455** )

**My Date of Birth is 27/06/1996**

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:

*H. Gowda*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (IOL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098.



*Meeta*  
(Student's Signature)

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

OK  
SR.No. 01

College Code : 647

# Lords Universal College

Topiwala Marg ,Off: Station Road, Goregaon (W), Mumbai – 62. Phone: 2879 1111

## Request for Transference Certificate

The Principal

of Patuck-gala College  
of Commerce & Management

Sir / Madam,

Ref.: Your College NOC..... 2017-18 / 11 dt 4/8/18 (copy attached)


Kindly send DIGITAL TRANSFERENCE CERTIFICATE for

Omprakash Gupta. M.COM - part - I


as mentioned in above-mentioned NOC at the earliest, to help us process his/her

Admission in our College.

Sincerely,

  
Principal  
Lords Universal College  
Vidya Vikas Education Trust's  
Lords Universal College  
Goregaon (W), Mumbai 400 104



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

As per print

OK  
SR. NO-02

College Code : 647

# Lords Universal College

Topiwala Marg ,Off: Station Road, Goregaon (W), Mumbai – 62. Phone: 2879 1111

## Request for Transference Certificate

The Principal

Patuck - Gala college

Santacruz (E), Mumbai - 55

Sir / Madam,

Ref.: Your College NOC no. 2017-18/9 dt 4/4/18 (copy attached) M. G. M. / P. J.


Kindly send **DIGITAL TRANSFERENCE CERTIFICATE** for

Nitin Sushil Kumar Dubey


as mentioned in above-mentioned NOC at the earliest, to help us process his/her

Admission in our College.

Sincerely,

  
Principal  
Lords Universal College  
Vidya Vikas Education Trust's  
Lords Universal College  
Goregaon (W), Mumbai 400 104



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



Rs 100 Paid  
OK  
SR. No. 03

College Code : 647

# Lords Universal College

Topiwala Marg, Off: Station Road, Goregaon (W), Mumbai - 62. Phone: 2879 1111

## Request for Transference Certificate

The Principal

Patuck Gala College

Santacruz (E), Mumbai - 55

Sir / Madam,

Ref.: Your College NOC. 2017-18/10 dt 4/8/18 <sup>M. Com Part - 1</sup> (copy attached)


Kindly send DIGITAL TRANSFERENCE CERTIFICATE for

Raj Madan Mohan Sahani

as mentioned in above-mentioned NOC at the earliest, to help us process his/her

Admission in our College.

Sincerely,

  
Principal  
Lords Universal College  
Lords Universal College  
Goregaon (W), Mumbai 400 104





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

Paid Rs. 100

15-16 GR. NO. 4630

College Code : 647

# Lords Universal College

Topiwala Marg ,Off: Station Road, Goregaon (W), Mumbai - 62. Phone: 2879 1111

Request for Transference Certificate

8286941068 / 9967408099

The Principal

Patuck gala college.....

Santacruz (E) Mumbai 400055

Sir / Madam,

Ref.: Your College NOC..... T.Y.B.Com ..... (copy attached)

Kindly send DIGITAL TRANSFERENCE CERTIFICATE for

Rahul Ravi Prasad Gupta (M.Com)

as mentioned in above-mentioned NOC at the earliest, to help us process his/her Admission in our College.

Sincerely,

For: 

Principal  
Lords Universal College





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

PRINCIPAL  
Vidya Vikas Education Trust  
Lords Universal College  
Goregaon (W), Mumbai 400 104

Rs. 100 paid

College Code : 647

# Lords Universal College

Topiwala Marg ,Off: Station Road, Goregaon (W), Mumbai - 62. Phone: 2879 1111

## Request for Transference Certificate

The Principal

Patuck gala college

Santacruz (E)

Sir / Madam,

Ref.: Your College NOC...T.Y. B.COM..... (copy attached)

Kindly send DIGITAL TRANSFERENCE CERTIFICATE for

Dinesh Shiva Gowda (M.COM)

as mentioned in above-mentioned NOC at the earliest, to help us process his/her

Admission in our College.

~~Sincerely,~~

Sincerely,

For: 

Principal  
Lords Universal College

**PRINCIPAL**  
Vidya Vitas Education Trust's  
Lords Universal College  
Goregaon (W), Mumbai 400 104





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



*Handwritten initials*

AS-100 paid

APPLICATION FOR TRANSFERENCE CERTIFICATE

From:

SHRI/KUM/SMT. Choudhary Rugaiya Mohd Yasin.  
(SURNAME) (NAME) (MIDDLE NAME)

Residential Address of the student: Shanti Nagar SP Road Near  
Nishant Dairy Milk Centre Uddala East Mumbai 40037.

The Principal/ Director,  
\_\_\_\_\_

Sir/ Madam,

I am to state that I am seeking admission to the MCOM 1 class in G. N. Khalsa College, Mumbai. I am to request you to send my Transference Certificate to the Principal, G. N. Khalsa College, Mumbai-19.

I attended the TyBcom Class (Div. A Roll no. 13. ) during the First/ Second Term/s \_\_\_\_\_ at your college and Passed/ Failed at the examination held by the University/ college in April / October of 20April (Examination Seat No. 3074070)

Yours Obediently,

Rugaiya  
(Student's Signature )

G. N. KHALSA COLLEGE, MUMBAI-19.

Ref No. \_\_\_\_\_ Date : \_\_\_\_\_

Forwarded with compliments to the Principal/ Director, \_\_\_\_\_ for favour of early compliance. The applicant's date of birth and the class to which the candidate is admitted at the college, may also kindly be supplied.

PRINCIPAL

NOTE: This application for Transference Certificate must be submitted to the Principal of the College last attended by the student immediately along with the necessary Transference Certificate Fee.



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

9167444795

KHAIRUL ISLAM HIGHER EDUCATION SOCIETY'S

**MAHARASHTRA COLLEGE OF ARTS, SCIENCE & COMMERCE**

246-A, Jehangir Boman Behram Marg, Mumbai - 400 008.

*RS-100 Not Paid*  
*paid*  
*25/9/18*

*R.No - 1648*

Date 19/09/18

**APPLICATION FOR TRANSFERENCE CERTIFICATE**

To,

From : Name & Address of the Student

The Principal,

Patuck Gala of  
Commerce And  
Management

Khan Abdul Qadir  
Aasiyana Apt, (-301  
L.B.S Marg, Kurla(w)  
Mum-70

Sir,

As I am seeking admission in M.Com - I of \_\_\_\_\_  
Maharashtra College. I request you to please arrange to send  
my Transference Certificate to the Principal of the above College.

**PARTICULARS :**

1. Class Attended : T.Y.B.Com Div. \_\_\_\_\_ Roll No. \_\_\_\_\_
2. Academic Years June / October Session :
3. Exam. Passed / Failed : Passed
4. Year of Examination : March / October 2015 Seat No. 1013042

Yours faithfully,

*A Qadir*

(Signature of the Student)

**MAHARASHTRA COLLEGE, MUMBAI - 400 008.**

Ref. No.

Date \_\_\_\_\_

Forwarded with compliments to the Principal / Head of the Department \_\_\_\_\_

\_\_\_\_\_ for favour of issue of Transference Certificate.



*2012016400900481*

**I/c Principal**

Patuck - Gala College of  
Commerce & Management

Santacruz (E), Mumbai-400 055

*Pring*

**PRINCIPAL**

Principal **MAHARASHTRA COLLEGE**

246-A, L.B.S. MARG,  
MUMBAI - 400 008

RS-100 paid

## 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. .

SAHANI

PINKY

VINOD

College Code : 279

MADHURI

(Surname)

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

Residential address of the student:

shiv shakti chawal D'mello Compound, L.B.S Nagar vakola bridge santacruz east mumbai 400055 , 0, Andheri, Mumbai Suburban, mumbai, Maharashtra

Pincode: 400055

Contact no. 9152043014

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

Sir / Madam,

I am to state that I have taken provisional admission to the **M.Com-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 **July 2018** Examination (Seat No. **3074913** )

**My Date of Birth is 05/06/1998**

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:

*Approved*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (IGOL)  
UNIVERSITY OF MUMBAI:  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098



(Student's Signature)

Document printed on Mon Aug 20 2018 16:40:28 GMT+0530 (India Standard Time)



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

*Pinky*

Not Paid

13-14

GR. NO. 3769

SR. NO. 24

**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 : 279  
 Shri / Smt. / Kum. . **SABAT** **ADITYA** **ARUNKUMAR** **KABITA**  
 (Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)  
 Residential address of **ROOM NO - 17, HANSRAJ MOLAKRAM CHAWL AMBEWADI, PARS PANCHAYAT ROAD, ANDHERI EAST**  
 the student: **, 0, Andheri, Mumbai Suburban, MUMBAI, Maharashtra**  
 Pincode: 400069 Contact no. 9969089275

9769438789

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-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 **Bachelors 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 **June 2016** Examination (Seat No. **1231353** )

**My Date of Birth is 18/12/1995**

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:

*Handwritten Signature*  
**I/C DIRECTOR**  
**INSTITUTE OF DISTANCE AND OPEN LEARNING (IDOL)**  
**UNIVERSITY OF MUMBAI**  
**DR. SHANKAR DAYAL SHARMA BHAVAN,**  
**VIDYANAGARI, KALINA,**  
**SANTACRUZ (E), MUMBAI-400 098**



(Student's Signature)

*Handwritten Signature: Sabat*

Document printed on Tue Aug 21 2018 23:24:20 GMT+0530 (India Standard Time)



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

paid Rs. 100/-  
R.No. 1666

UNIVERSITY OF MUMBAI  
Institute of Distance and Open Learning  
Dr. Shankar Dayal Sharma Bhavan,  
Vidyanagari, Santacruz (east), Mumbai-400098

Contact No. - 7208225600

13-14 GR No. 3869

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

College Code : 279

From :	VISHWAKARMA	SHILPA	MAHENDRA	PRABHAVATI
Shri / Smt. /Kum. .	(Surname)	(Own Name)	(Father's/Husband's Name)	(Mother's Name)
Residential address of the student:	NAVJEEVAN RAHIVASHI SANGH D'MELLO COMPOUND SANTACRUZ EAST , 0, Andheri, Mumbai Suburban, MUMBAI, Maharashtra			
	Pincode: 400055	Contact no. 7208225600		

To,  
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-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. **1231711** )

My Date of Birth is **22/08/1995**

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:

*Horwada*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (DOL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098.



*Prabhavati*  
27.09.18  
(Student's Signature)

*Meeta*

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





UNIVERSITY OF MUMBAI  
Institute of Distance and Open Learning

paid Rs. 100/-  
R.No. 1663

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. . ANSARI AZIM MOHAMMED SALAAM PARVEEN  
(Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)  
Residential address of the student: 2/201 MUBARAK COMPLEX PIPE RD KURLA WEST , 0, Kurla, Mumbai Suburban, MUMBAI,  
Maharashtra  
Pincode: 400070 Contact no. 8169419584  
College Code : 279

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-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 2018** Examination (Seat No. **3073981** )

My Date of Birth is **05/10/1997**

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:

*Handwritten*  
**I/C DIRECTOR**  
**INSTITUTE OF DISTANCE AND OPEN LEARNING (I/OOL)**  
**UNIVERSITY OF MUMBAI**  
**DR. SHANKAR DAYAL SHARMA BHAVAN,**  
**VIDYANAGARI, KALINA,**  
**SANTACRUZ (E), MUMBAI-400 098.**



*Handwritten*  
(Student's Signature)

Document printed on Thu Sep 20 2018 18:19:43 GMT+0530 (India Standard Time)



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

RS. 100 Paid  
SR. No. 04

College Code : 647

# Lords Universal College

Topiwala Marg ,Off: Station Road, Goregaon (W), Mumbai – 62. Phone: 2879 1111

## Request for Transference Certificate

The Principal

Patuck - Gala College

Sir / Madam,

Ref.: Your College NOC..... *M.Com Part-1*  
(copy attached)

Kindly send **DIGITAL TRANSFERENCE CERTIFICATE** for

KUSUM DEVISINGHM SOLANKI

as mentioned in above-mentioned NOC at the earliest, to help us process his/her Admission in our College.

Sincerely,



Principal  
Lords Universal College  
Lords Universal College  
Goregaon (W), Mumbai 400 104



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

5/25/2018

Contact No → 9833315935

819118

GR. NO. 4895

15-16

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. .

VISHWAKARMA  
(Surname)

ASHUTOSH  
(Own Name)

ASHARAM  
(Father's/Husband's Name)

College Code : 279

SHANTIDEVI  
(Mother's Name)

Residential address of the student:

Room No 04 Chawl No 2 Sharma Punjabi Chawl Shastri Nagar Kalina , 0, Andheri, Mumbai Suburban, Mumbai, Maharashtra  
Pincode: 400029 Contact no. 7021259207

To,

The principal / head of the University Dept

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

Sir / Madam,

I am to state that I have taken provisional admission to the M.Com-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 2018 Examination (Seat No. 3075260 )

My Date of Birth is 20/08/1997

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:

*Ashwadev*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (DOOL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098



*Ashutosh V*  
(Student's Signature)

Document printed on Sat Sep 29 2018 14:43:58 GMT+0530 (India Standard Time)



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

*Paid Rs 100  
R.No - 1703*

*SR No. 29*

**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. .	<b>SHAH</b> (Surname)	<b>FAISAL</b> (Own Name)	<b>MOHAMMAD JAMA</b> (Father's/Husband's Name)	College Code : 279
Residential address of the student:	<b>R/NO 305 BUILDING NO 16 MOTILAL NEHRU NAGAR B.K.C NEAR IRE BRIGADE BANDRA ( EAST ) 400051</b> <b>, 0, Andheri, Mumbai Suburban, MUMBAI, Maharashtra</b> Pincode: <b>400051</b> Contact no. <b>8108144043</b>			<b>SAQLAIN</b> (Mother's Name)

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-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 2018** Examination (Seat No. **3074985** )

**My Date of Birth is 14/06/1998**

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:

*Approved*

**I/C DIRECTOR**  
INSTITUTE OF DISTANCE AND OPEN LEARNING (IDOL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098



*[Signature]*

(Student's Signature)

Document printed on Sat Sep 29 2018 15:44:11 GMT+0530 (India Standard Time)



*[Signature]*

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

9167717214

paid Rs-100/-

UNIVERSITY OF MUMBAI

R.No. 1707

Institute of Distance and Open Learning

GR No. 4676

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. .

RAI

RAKESH

BACHCHA

College Code : 279

SHAKUNTALDEVI

(Surname)

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

Residential address of the student:

Shastri nagar western exp highway Near domestic airport Mumbai 400099 , 0, Andheri, Mumbai Suburban, Mumbai suburban , Maharashtra

Pincode: 400099

Contact no. 9137626534

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-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 SEM VI 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 2018 Examination (Seat No. 3074852 )

My Date of Birth is 10/05/1998

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:

*H. S. D. S.*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (DOOL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098



*S. S. S.*  
(Student's Signature)

Document printed on Fri Aug 31 2018 09:27:52 GMT+0530 (India Standard Time)



*Meeta*

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

Paid Rs. 100/- 8169073346 2012-13  
R.No-1729 Ote s.n. No. 35



Mother Velankani Education Trust Run's  
**Ashadeep Adhyapak Mahavidyalaya**  
ENGLISH MEDIUM (B.ED./COLLEGE)  
(Affiliated to University of Mumbai)

Mahesh Park, Tulinj Road, Nallasopara (E), Tal. Vasai, Dist. Thane, PIN - 401209.  
E-mail : mothervelankani.educationtrust@gmail.com Website : www.mvet.ashadeep.org

Ref. No. AAM/186/2018-19

Date: 08/10/2018

ASHADEEP ADHYAPAK MAHAVIDYALAYA  
ENGLISH MEDIUM (B.Ed / D.Ed COLLEGE)  
(MANAGED BY MOTHER VELANKANI EDUCATION TRUST RUN'S)  
APPLICATION FOR TRANSFERENCE CERTIFICATE/MIGRATION

From:  
Smt./Mr./Smt: Mishra Archana Omprakash  
(Surname) (Name) (Middle Name)

To:  
The Principal (Previous college Name and Address)  
Patuck Gala college of commerce and Mgt.,  
Valcola Bridge, Santacruz (East),  
Mumbai - 400055.

Sir/ Madam,

I am to state that I seeking admission to the B.Ed. class in ASHADEEP ADHYAPAK MAHAVIDYALAYA, Nallasopara (E).  
I am to request you to send my Transference Certificate to my Principal, ASHADEEP ADHYAPAK MAHAVIDYALAYA, Mahesh Park, Tulinj Road, Nallasopara (E), Tal: Vasai, Dist: Thane-401209.  
I attended the TJB.com class (DIV B Roll No. \_\_\_\_\_) during the First / Second Term/s of \_\_\_\_\_ of your college and passed / failed at the examination held by the University in April / ~~October~~, of 2015 ( Examination Seat No. 1013215 )

Yours faithfully  
Amishra  
(Students Signature)

ASHADEEP ADHYAPAK MAHAVIDYALAYA  
Mahesh Park, Tulinj Road, Nallasopara (E)  
Tal: Vasai, Dist: Thane-401209

Forwarded with Compliments to the Principal.

The Students will pay the TC fee directly



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

Amishra  
Principal  
ASHADEEP ADHYAPAK MAHAVIDYALAYA  
Tulinj, Nallasopara (E); Dist. Thane-401 209.

Paid Rs. 100/- *ole*

R.No - 1739

SR No 36

Direct Tel. No. : 91-22-2652 2677  
Tel. No. 91-22-2654 3322  
91-22-2654 3323

University of Mumbai

DEPARTMENT OF COMMERCE

University of Mumbai,  
Vidyanagari Campus, Kalina,  
Santacruz (East),  
MUMBAI - 400 098. (INDIA)



Date: 13/9/2018

From: Pandey Jaya M.  
R.No. 58, 1<sup>st</sup> 2<sup>nd</sup> Floor  
Vakola bridge, Dhobighat  
Santacruz (E)  
- 55.

9867520117

To:  
The Principal,  
Patuck Gala collage  
of commerce  
and management

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.

I attended the B.Com./M.Com. Class in your College in the subject Accounts A1A during the 1<sup>st</sup>/2<sup>nd</sup> term of the academic year 2018-19.

Yours faithfully,

(Pandey Jaya)

No.U.D./Com / 20

Forwarded with compliments to the Principal  
College for favour of compliance.

*Jyoti*

Professor and Head, Department of Commerce  
University of Mumbai  
Department of Commerce  
University of Mumbai

mkr



*Meeta*

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

Not Paid

Paid Rs. 100/-

*ole*

TC No. 38  
8286555371  
8424843468

R.No -

UNIVERSITY OF MUMBAI

Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

13-14

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

From :

Shri Smt./Kum. ...

SINGH

(Surname)

SUCHITA

(Own Name)

RAVISKAR

(Father's/Husband's Name)

GYANTI

(Mother's Name)

College Code : 279

Residential address of the student:

310, 3 FLR, PRIDE OF VAKOLA DATTA MANDIR ROAD SANTACRUZ EAST, 0, Andheri, Mumbai Suburban, MUMBAI, Maharashtra

Pincode: 400055

Contact no. 8286555371

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-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. **1231589** )

My Date of Birth is **15/11/1995**

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:

*Approved*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (DOL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098.



*Sunil*  
(Student's Signature)

Document printed on Mon Aug 27 2018 18:05:07 GMT+0530 (India Standard Time)



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



OK

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

Rs 100 Paid  
SR.No-39.

From :

College Code : 279

Shri / Smt. /Kum. .

TAWRAE

SNEHAL

PRAKASH

VANDANA

(Surname)

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

Residential address of the student:

RN.7,Sharma punjabi chawl Shastrinagar,kalina Santacruz(e) , 0, Andheri, Mumbai Suburban, Mumbai, Maharashtra

Pincode: 400029 Contact no. 9850726101

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 PGDFM(Revised)-PGDFM 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 July 2018 Examination (Seat No. 3075196 )

My Date of Birth is 03/09/1996

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:

*Handwritten*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (DOOL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098



*Handwritten Signature*  
(Student's Signature)

Document printed on Tue Aug 28 2018 20:14:34 GMT+0530 (India Standard Time)



*Handwritten Signature*

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

paid Rs. 100/-  
R.NO -1786

06

Direct Tel. No. : 91-22-2652 2677  
Tel. No. 91-22-2654 3322  
91-22-2654 3323

University of Mumbai

DEPARTMENT OF COMMERCE

University of Mumbai,  
Vidyanagari Campus, Kalina,  
Santacruz (East),  
MUMBAI - 400 098. (INDIA)

Date: 13/08/2018



Jadav KHUSHBOO  
From:  
5, Shali'k Shamma  
Chauhan Sai Baba  
Road Jambhakar,  
Magan Khan (E)

To:  
The Principal,  
Patuck Gala-  
College Commerce  
& Management

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 <sup>IT</sup> Transference Certificate to the Head University Department of Commerce.

I attended the B.Com./M.Com. Class in your College in the subject Accounting AIA during the 1<sup>st</sup>/2<sup>nd</sup> term of the academic year 2018-19.

Yours faithfully,

JADAV KHUSHBOO

No.ED./Com / 20

Forwarded with compliments to the Principal  
College for favour of compliance.

*Dr. Anil Kumar*

Professor and Head, Department of Commerce  
University of Mumbai  
University of Mumbai

mkr



*Meeta*

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

2014-15 GR. NO - 4077

Sr. NO. 41

OK

AS/loopan  
R.No. 17786

Direct Tel. No. : 91-22-26522677  
Tel. No. : 91-22-26543322  
Tel. No. : 91-22-26543323

University of Mumbai



DEPARTMENT OF COMMERCE

University of Mumbai,  
Vidyanagari Campus, Kalina,  
Santacruz (East),  
MUMBAI - 400 098. (INDIA)

Date: 20/11/18

From:

HASHMI MUNIRA  
DALWADI NAGAR WATE  
B. SANTICRUZ (EAST)  
400055

To:

The Principal,  
Patuck Gala College,  
Santacruz (East)  
Mumbai - 400055

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.

I attended the B.Com./M.Com. Class in your College in the subject Commerace during the 1<sup>st</sup>/2<sup>nd</sup> term of the academic year

Yours faithfully,

(Munira Hashmi)

No.UD./Com./ /20

Forwarded with compliments to the Principal  
College for favour of compliance

D. J. D. D.

Professor and Head Department of Commerce  
Department of Commerce  
University of Mumbai



M. S.

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

mk r

SR.No. 42  
RS. 100 Paid  
R.No. 1800

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 : 279
Shri / Smt. /Kum. .	<b>JAIN</b>	<b>RANJANA</b>	<b>HARISH KUMAR JAIN</b>	<b>SUMITRA JAIN</b>
	(Surname)	(Own Name)	(Father's/Husband's Name)	(Mother's Name)
Residential address of the student:	<b>ROOM NO 7 JAMBUL KAKA WADI TRIVENI CHAWL SHRADHHA NAND ROAD VILE PARLE EAST , 0, Mumbai, Mumbai City, MUMBAI, Maharashtra</b>			
	Pincode: 400057	Contact no. 9892429561		

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-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 2018** Examination (Seat No. **3074349** )

**My Date of Birth is 21/01/1998**

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:

*Handwritten signature*  
**I/C DIRECTOR**  
**INSTITUTE OF DISTANCE AND OPEN LEARNING (IDOL)**  
**UNIVERSITY OF MUMBAI**  
**DR. SHANKAR DAYAL SHARMA BHAVAN,**  
**VIDYANAGARI, KALINA,**  
**SANTACRUZ (E), MUMBAI-400 098.**



*Handwritten signature: Ranjana*  
 ↑  
 (Student's Signature)

Document printed on Sat Aug 18 2018 13:13:51 GMT+0530 (India Standard Time)



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

GR. NO 3893  
13-14

9321537588

Direct Tel. No. : 91-22-26522677  
Tel. No. : 91-22-26543322  
91-22-26543323

University of Mumbai



DEPARTMENT OF COMMERCE

University of Mumbai,  
Vidyanagari Campus, Kalina,  
Santacruz (East),  
MUMBAI - 400 098. (INDIA)

Date: 22/11/2018

From:

PANIKAJ PANDAY  
\_\_\_\_\_  
\_\_\_\_\_

paid Rs. 100/-  
R.No - 1822

To:

The Principal,

Patuck gala college  
of Commerce & Management  
\_\_\_\_\_

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.

I attended the B.Com./M.Com. Class in your College in the subject B.com during the 1<sup>st</sup>/2<sup>nd</sup> term of the academic year 2015-2016

Pandey  
Yours faithfully.

No.UD./Com/ /20

Forwarded with compliments to the Principal \_\_\_\_\_  
College for favour of compliance.

Dr. Ankur

Professor and Head, Department of Commerce  
University of Mumbai, Commerce  
University of Mumbai

mk



Meeta

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

Rs. 100 paid  
SR.No. 44  
2016-17

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 : 279

Shri / Smt. /Kum. . GAWAS SAILEE SADANAND TRUPTI  
(Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)

Residential address of the student: roon no. 2, ghanekar chawl, shree krushn nagar, vakola pipe line, santacuze east, mumbai 400055 , 0, Mumbai, Mumbai City, mumbai, Maharashtra

Pincode: 400055 Contact no. 8779648974

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-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 2017** Examination (Seat No. 6237393 )

**My Date of Birth is 31/07/1997**

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:

*H. Orwade*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (DOOL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098.



*Sailee*

(Student's  
Signature)

Document printed on Sat Aug 25 2018 11:17:39 GMT+0530 (India Standard Time)



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

Rs. 100 Paid

970 2624089

30<sup>th</sup> NOV, 18

Direct Tel. No. : 91-22-2652 2677  
Tel. No. : 91-22-2654 3322  
91-22-2654 3323

University of Mumbai



DEPARTMENT OF COMMERCE

University of Mumbai,  
Vidyanagari Campus, Kalina,  
Santacruz (East),  
MUMBAI - 400 098. (INDIA)

Date: 13.08.2018

From: Nazma Amirullah Siddiqui  
Amirullah Compound  
Kalina Shastri Nagar  
Chunna Bhatti near Sunni Raza  
Masjid Santacruz (E) Mum - 29

To:

The Principal,

Patuck Gala College of Commerce & Management,

Patuck Compound, 100,

Nahru Road, Nustamba Patuck Marg,

Vakola Bridge, Santacruz (E)

Mum. 400055

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.

I attended the B.Com./M.Com. Class in your College in the subject

B.Com.

during the 1<sup>st</sup>/2<sup>nd</sup> term of the academic year

2015 to 2018

Yours faithfully,

*Nazma*

Nazma Amirullah Siddiqui

No.UD/Com / 20

Forwarded with compliments to the Principal

College for favour of compliance.

*D. S. Chikar*

Professor and Head, Department of Commerce  
University of Mumbai  
Professor and Head  
Department of Commerce  
University of Mumbai

mkr



*Meeta*

I/c Principal

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

RS. 100/- Paid  
SR. NO. 46

Name & Address of the Applicant } KHAN OVEZ AHMED  
614, 1ST FLOOR, BISMILLAH SOC.,  
HALAV POOL, NR. GOOD LUCK DAIRY,  
KURLA (W) MUM. 400070.  
Contact No. 9930860890

**APPLICATION FOR TRANSFERENCE CERTIFICATE**

**BUNTS / ALC / APPL / TC / 20 - /**

Date : 27/11/18

The Principal  
PATUK GALA COLLEGE.  
NEHRU ROAD, YAKOLA (E)  
MUMBAI : 400055.

(Name and Address of the Previous College attended by the Student)

Subject - Transference Certificate

Reference - N.O.C. No. \_\_\_\_\_ Date \_\_\_\_\_ issued by your College.

Sir,

I, Mr./Ms. OVEZ AHMED IRFAN AHMED KHAN have been admitted to BUNTS SANGHA MUMBAI Anna Leela College of Commerce and Economics & Shobha Jayaram Shetty College for BMS, Kurla (East), Mumbai - 400 070 in Class B.COM P-T. Adm.No. \_\_\_\_\_ Roll No. \_\_\_\_\_ during this academic year 20\_\_ 20\_\_ . I was a student of your College previously and I give below all particulars about it. I have to request you to kindly send my Transference Certificate to the Principal, BUNTS SANGHA MUMBAI Anna Leela College of Commerce and Economics & Shobha Jayaram Shetty College for BMS, Kurla (East), Mumbai - 400 070 at you earliest.

The necessary fee of Rs. 100/- (Rupees One Hundred only) has been paid by me through this college.

**MY PARTICULARS**

1. Name of the Student : KHAN OVEZ AHMED IRFAN AHMED.  
(IN BLOCK CAPITAL LETTERS, beginning with Surname.)
2. I attended the Class in your College during 1st Term / 2nd Term / Both Terms ✓  
of the academic year 2018- 2019
3. My Division and Roll No. in your College was A - 26.
4. My Date of Birth is 20<sup>th</sup> Apr. 1996. (in words THIRTY APRIL NINETEEN NINTYSIX.)
5. My optional subjects were \_\_\_\_\_
6. I \* passed / failed in / did not appear at / did not fill in Examination Form for the Examination of the year 2017.  
\* Strike out which is not applicable

Kindly send the confirmation of Enrolment / Eligibility Letter No. and date of the University of Mumbai.

Yours faithfully,

(Signature of the Student)

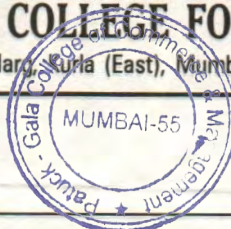


**BUNTS SANGHA MUMBAI'S ANNA LEELA COLLEGE OF COMMERCE & ECONOMICS SHOBHA JAYARAM SHETTY COLLEGE FOR BMS**

Shashi Manmohan Shetty Higher Education Complex, Buntara Bhavana Marg, Kurla (East), Mumbai - 400 070. Tel. : 022 2405 7249

**BUNTS / ALC / TC. IN / ADM - 22 / \_\_\_\_\_ /**

Forwarded with compliments to the Principal, \_\_\_\_\_



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

for necessary action. The student has been asked to pay Transference Certificate Fee directly to your College.

Place : Kurla (East), Mumbai - 400 070.  
Date : \_\_\_\_\_



Principal  
Anna Leela College of Commerce & Economics  
Shobha Jayaram Shetty College for BMS.  
Kurla (East), Mumbai - 400 070.



Acad PS,  
1001-  
SR No. 47  
A. No - 1857

oh. 986783799  
3

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... SHINDE DEEPALI LAXMAN CHHAYA  
(Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)  
College Code : 01  
Residential address of the student: SUNDER NAGAR SARJU GUPTA CHAWL NEAR YOGIRAJ ASHRAM ROAD KALINA SANTACRUZ EAST ,  
0, Andheri, Mumbai Suburban, MUMBAI, Maharashtra  
Pincode: 400098 Contact no. 9867837993

To,  
The principal / head of the University Dept  
(Full 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.  
I attended the TYBCOM 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 2015 Examination (Seat No. 1013647 )  
My Date of Birth is 04/09/1994  
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

*Shinde*

Date:

*H. H. H. H.*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (I0011)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098



(Student's Signature)

Document printed on Wed Nov 01 2017 15:22:57 GMT+0530 (India Standard Time)



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

8/29/2018

9833571527

14-15

ok

paid Rs 100/-

R.No. 1871

Ala

UNIVERSITY OF MUMBAI GR.No. 4326  
Institute of Distance and Open Learning SR.No. 48

Dr. Shankar Dayal Sharma Bhavan,  
Vidyanagari, Santacruz (east), Mumbai-400098

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

From :			College Code : 279
Shri / Smt. /Kum. .	VIVIAN	VARGHESE	DAISY
	(Surname)	(Own Name)	(Mother's Name)
Residential address of the student:	606, SAURPARNIKA CO-OP HSG.SOCIETY LTD, KOLIVERY VILLAGE, KALINA SANTACRUZ (EAST) , 0, Mumbai, Mumbai City, MUMBAI, Maharashtra		
	Pincode: 400098	Contact no. 9833571527	

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-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 2018 Examination (Seat No. 3075244 )

My Date of Birth is 12/05/1993

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:

*[Signature]*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (IDOL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098



*[Signature]*  
(Student's Signature)

Document printed on Wed Aug 29 2018 10:11:19 GMT+0530 (India Standard Time)



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

paid Rs. 100/-

12-13

UNIVERSITY OF MUMBAI  
Institute of Distance and Open Learning

R.NO. 1883

OL

Dr. Shankar Dayal Sharma Bhavan,

Vidyagari, Santacruz (east), Mumbai-400098

GR.NO-3252

S.No. 49

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

College Code : 279

From :	<b>LAD</b>	<b>SWAPNALI</b>	<b>SATISH</b>	<b>SHUBHANGI</b>
Shri / Smt. /Kum. .	(Surname)	(Own Name)	(Father's/Husband's Name)	(Mother's Name)
Residential address of the student:	<b>Room No. 106, E1, Yashodha Building Pramila Nagar, Near MacDonald Dahisar (West), 0, Boriwali, Mumbai Suburban, Mumbai, Maharashtra</b>			
	Pincode: 400068	Contact no. 9699740710	8369618425	

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-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 **March 2015** Examination (Seat No. **1013115** )

**My Date of Birth is 06/11/1993**

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, Vidyagari, Santacruz (East), Mumbai - 400 098** at the earliest.

Thanking You,

Verified by

Yours obediently

Date:

*Handwritten*  
**I/C DIRECTOR**  
 INSTITUTE OF DISTANCE AND OPEN LEARNING (IDOL)  
 UNIVERSITY OF MUMBAI  
 DR. SHANKAR DAYAL SHARMA BHAVAN,  
 VIDYANAGARI, KALINA,  
 SANTACRUZ (E), MUMBAI-400 098.



*Handwritten Signature*  
(Student's Signature)

Document printed on Mon Dec 10 2018 19:31:41 GMT+0530 (India Standard Time)



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

Paid Rs. 100/-

UNIVERSITY OF MUMBAI

OK  
SR No. 50

Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

R.No. 1901  
Ad - 28/12/18

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

From :

College Code : 279

Shri / Smt. /Kum. .

RATHOD

NIRAV

DINESH

MANISHA

(Surname)

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

Residential address of the student:

more chawl milind nagar gaodevi , 0, Kurla, Mumbai Suburban, mumbai, Maharashtra

Pincode: 400055

Contact no. 9769743799

To,

The principal / head of the University Dept

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

NA

Sir / Madam,

I am to state that I have taken provisional admission to the **M.Com-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 2018** Examination (Seat No. **3074884** )**My Date of Birth is 03/02/1997**

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:

*H. C. D. S. M.*  
**I/C DIRECTOR**  
 INSTITUTE OF DISTANCE AND OPEN LEARNING (IDOL)  
 UNIVERSITY OF MUMBAI  
 DR. SHANKAR DAYAL SHARMA BHAVAN,  
 VIDYANAGARI, KALINA,  
 SANTACRUZ (E), MUMBAI-400 098.



*Meeta*  
 (Student's  
 Signature)

Document printed on Wed Sep 05 2018 15:05:49 GMT+0700 (Indochina Time)



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

Period Rs. 100 ✓  
R.No. 1978

ok  
SR.No 51.  
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 : 279

Shri / Smt. /Kum. .

**MALIK**

**SABREEN**

**USMAN**

**SALMA BEGUM**

(Surname)

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

Residential address of the student:

near gandhi nagar ground EA/1 GANDHI NAGAR 213 bazar ward new mill road kurla west , 0, Kurla, Mumbai Suburban, MUMBAI, Maharashtra

Pincode: 400070

Contact no. 8433865324

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-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 **July 2018** Examination (Seat No. 3074560 )

**My Date of Birth is 02/06/1995**

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:

*Handwritten*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (I.O.L.)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098.



*Handwritten Signature*  
(Student's Signature)

Document printed on Thu Aug 30 2018 21:37:35 GMT+0530 (India Standard Time)



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

*ok*

**UNIVERSITY OF MUMBAI**  
**Institute of Distance and Open Learning**

Dr. Shankar Dayal Sharma Bhavan,

Vidyanageri, Santacruz (east), Mumbai-400098

*15-16*  
*SR No-52.*

*R.No-2010*  
*Re-1001*  
*Monday*

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

From :				College Code : 279
Shri / Smt. /Kum. .	<b>KHAN</b>	<b>AFRA</b>	<b>MOHAMMED AZAM</b>	<b>RUKHSANA</b>
	(Surname)	(Own Name)	(Father's/Husband's Name)	(Mother's Name)
Residential address of the student:	<b>40 LAKDAWALA BLDG ROOM NO 8 1ST FLOOR TANK STREET SURTI MOHALLA NEAR JJ HOSPITAL MUMBAI CENTRAL , 0, Mumbai, Mumbai City, MUMBAI, Maharashtra</b>			
	Pincode: 400008	Contact no. 7506557573		

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-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 **July 2018** Examination (Seat No. **3074428** )

**My Date of Birth is 09/08/1998**

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, Vidyanageri, Santacruz (East), Mumbai – 400 098** at the earliest.

Thanking You,

Verified by

Yours obediently

Date:

*forwarded*

**I/C DIRECTOR**  
INSTITUTE OF DISTANCE AND OPEN LEARNING (I.O.L.)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098



*A Khan*

(Student's Signature)

Document printed on **Thu Aug 30 2018 19:22:57 GMT+0530 (India Standard Time)**



*Meeta*

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



**UNIVERSITY OF MUMBAI  
INSTITUTE OF DISTANCE EDUCATION**

Dr. Shanker Dayal Sharma Bhavan,  
Vidyanagari, Santacruz (East), Mumbai - 400 098.

*ole*  
*700L*      *paid Rs. 100/-*  
*R.NO - 2042*  
*GR.No - 3378*

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

From : \_\_\_\_\_ College Code : \_\_\_\_\_

Shri / Smt. SHARMA POOJA SABHAJEET MITHLESH  
(In Block Letters) (Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)

Residential address of the student H-22, GROUND FLOOR  
RIZVI PARK SANTACRUZ WEST MUMBAI 400054

Pin Code: 400054 Tel. No. 9769248514

To  
The Principal / Head of the University Dept.  
(Full Name and Address of the last attended College / University Dept.) DR. SHANKAR DAYAL SHARMA  
BHAVAN VIDYANAGARI KALINA SANTA CRUZ EAST (IDOL)  
MUMBAI 400098 MAHARASHTRA (INDIA)

Through Asstt. Registrar (Adm.) I.D.E.

Sir / Madam,

I am to state that I have taken provisional admission to the M.COM Class in the institute of Distance Education 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 M-COMPARI-II Class (Div. - Roll No. 53243) during the First/Second Term/s of the academic year 2016 - 2018 at your College and passed/failed/was awarded A.T.K.T. at the examination held by University Dept. / College in April/October \_\_\_\_\_ Examination (Seat No. \_\_\_\_\_)

My Date of Birth is 12/06/1993

I am enclosing the attested xerox copy of the mark-sheet/s of the above mentioned examination/s. I have also paid the T.C. Fee of Rs. 100/- at the Institute of Distance Education at the time of admission.

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

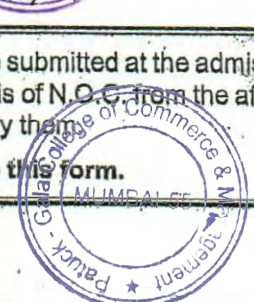
Thanking you,

Verified by \_\_\_\_\_  
(Signature of the Adm. Clerk)

Yours obediently,  
(Student's Signature)

Date: 17/01/2019

**N.B.:** 1) This Application for Transference Certificate must be submitted at the admission counter by only those students who seek admission to I.D.E. on the basis of N.O.C. from the affiliated college or the Department of the University of Mumbai last attended by them.  
2) The old students of I.D.E. are NOT required to fill up this form.



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

University of Mumbai I.D.E. Paid Rs. 100/-

R.No - 2043

GR.No 3400



UNIVERSITY OF MUMBAI  
INSTITUTE OF DISTANCE EDUCATION

Dr. Shanker Dayal Sharma Bhavan,  
Vidyanagari, Santacruz (East), Mumbai - 400 098.

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

From : Shri / Smt. Kum. SINGH SAKSHI ASHOK BIBHA  
(In Block Letters) (Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)

College Code : \_\_\_\_\_

Residential address of the student GAZDHAR BANDH  
SANTACRUZ WEST 400054

Post Code: 400054 Tel. No. 998706305

To  
The Principal / Head of the University Dept.  
(Full Name and Address of the last attended College / University Dept.) DR. SHANKAR DAYAL  
SHARMA BHAVAN VIDANAGARI KALINA SANTACRUZ EAST  
(I.D.E.) MUMBAI 400098

Through Asstt. Registrar (Adm.) I.D.E.

Sir / Madam,

I am to state that I have taken provisional admission to the M.COM Class in the institute of Distance Education 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 M.COM-Part II Class (Div. \_\_\_\_\_ Roll No. \_\_\_\_\_) during the First/Second Term/s of the academic year 2018-19 at your College and passed/failed/was awarded A.T.K.T. at the examination held by University Dept. / College in April/October October Examination (Seat No. 21412)

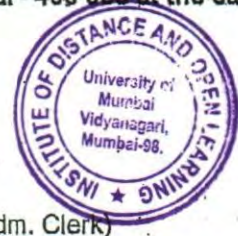
My Date of Birth is 08/04/1993

I am enclosing the attested xerox copy of the mark-sheet/s of the above mentioned examination/s. I have also paid the T.C. Fee of Rs. 100/- at the Institute of Distance Education at the time of admission.

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

Thanking you,

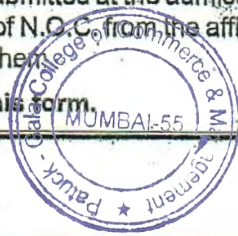
Verified by  
  
(Signature of the Adm. Clerk)



Yours obediently,  
  
(Student's Signature)

Date: 17/01/2019

**N.B.:** 1) This Application for Transference Certificate must be submitted at the admission counter by only those students who seek admission to I.D.E. on the basis of N.O.C. from the affiliated college or the Department of the University of Mumbai last attended by them.  
2) The old students of I.D.E. are NOT required to fill up this form.



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



sr. No. 55

paid Rs. 1001 - 06 750 60 17783  
R.No - 2257 2015-16

Direct Tel. No. : 91-22-2652 2677  
Tel. No. 91-22-2654 3322  
91-22-2654 3323

University of Mumbai



DEPARTMENT OF COMMERCE  
University of Mumbai,  
Vidyanagari Campus, Kalina,  
Santacruz (East),  
MUMBAI - 400 098. (INDIA)

Date: 13/08/18

From: KHAN HABIBA FAROCH ALVI  
ROOM NO. 6, YASSEN KHAN  
CHAWL, SHACHTRZ NAGAR  
KALINA, SANTACRUZ (E)  
MUMBAI - 400024

To:  
The Principal,  
PATUCK GALA COLLEGE  
PATUCK CAMPUS, 100, NEHRU  
ROAD, RUSTOMBA PATUK, MARC,  
VAKOLA BRIDGE, MUMBAI-4000-055

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.

I attended the B.Com./M.Com. Class in your College in the subject B. COM ~~ADV. ACCOUNTS & CORPORATE ACCT~~ FOR MARCH during the 1<sup>st</sup>/2<sup>nd</sup> term of the academic year 2015-2018.

Yours faithfully,

KHAN HABIBA

No.UD./Com / 20

Forwarded with compliments to the Principal  
College for favour of compliance.

Dr. Sankar  
Professor and Head, Department of Commerce  
University of Mumbai  
Department of Commerce  
University of Mumbai

mkr



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

GR No. 2397

SR No -

RS. 100/-

2010-11

04  
12/2/19

2010-11



UNIVERSITY OF MUMBAI  
INSTITUTE OF DISTANCE EDUCATION

Dr. Shanker Dayal Sharma Bhavan,  
Vidyanagari, Santacruz (East), Mumbai - 400 098.

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

From: College Code: \_\_\_\_\_

Shri / Smt. Kum. BHOGALE SANTOSH BALKRISHNA  
(In Block Letters) (Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)

Residential address of the student 150/4/6, Chhatrapati Nagar, Vikas Committee  
Colibar Road, Near Mahatma Society, Santacruz (E)

Pin Code: 400055 Tel. No. \_\_\_\_\_

To: The Principal / Head of the University Dept.

(Full Name and Address of the last attended College / University Dept.) Patuck Gala College at  
Commerce & Management, Nehru Road, Vankola Bridge  
Santacruz (E)

Through Asstt. Registrar (Adm.) I.D.E.

Sir / Madam,

I am to state that I have taken provisional admission to the M.com Part 2 Class in the institute of Distance Education 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 (Div. C Roll No. \_\_\_\_\_) during the First/Second Term/s of the academic year 2013 at your College and passed/failed/was awarded A.T.K.T. at the examination held by the University Dept. / College in April/October 2013 Examination (Seat No. 14984)

My Date of Birth is 29/07/1992

I am enclosing the attested xerox copy of the mark-sheet/s of the above mentioned examination/s. I have also paid the T.C. Fee of Rs. 100/- at the Institute of Distance Education at the time of admission.

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

Thanking you,

Verified by

(Signature)

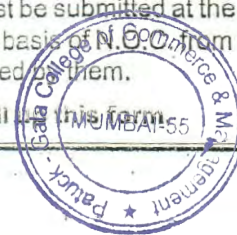


Yours obediently,

(Signature)

Date: \_\_\_\_\_ (Signature of the Adm. Clerk) (Student's Signature)

N.B.: 1) This Application for Transference Certificate must be submitted at the admission counter by only those students who seek admission to I.D.E. on the basis of N.O.C. from the affiliated college or the Department of the University of Mumbai last attended by them.  
2) The old students of I.D.E. are NOT required to fill this form.



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

9768864261

Paid Rs. 100 L R.NO - 2914 OK

APPLICATION FOR TRANSFERENCE CERTIFICATE ( IN DUPLICATE )

From:- Name of the Student Mr/Miss Mrs. Chhagan Ram Akkadh Vishwakarma

2011-12

GR NO - 2920

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

Date:- 7-02-2019

To,  
The Principal,  
Patuck Gala College  
Nehru Road, Vakola Bridge  
Santacruz (E) MUM - 055.

Sir,

I am to state that I am seeking admission to the MCOM-I  
Class Division A Roll No. 34 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. 100 being the fee for Transference  
Certificate and Rs. - as late fee ( if charged ).

I attended the T.Y.B.Com Class, Division C Roll No.           
in your College during the Ist/IIInd Term or both terms of the year  
2014 - 2015 and Passed/failed at the T.Y.B.Com class, at College/  
Uni. Examination of the year 2014-15. My college exam/UNI exam  
Seat No. was 20037.

Yours faithfully,



Meeta

Chhagan

( Signature of the Student )

**I/c Principal**

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

P N D C Ref. No. TC/- \_\_\_\_\_

Date:- \_\_\_\_\_

Forward with compliments to the Principal Public Night  
\_\_\_\_\_ College for favour of compliance.



Principal

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

129/2019

06 13-14

CONTACT NO. 9870474425

paid Rs. 100/-

R.No. 3065

UNIVERSITY OF MUMBAI

Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santaacruz (east), Mumbai-400098

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

From :				College Code : 279
Shri / Smt. / Kum. .	VIRANI	KARISHMA FATEMA	SADIQUE HUSSAIN	YASMEEN
	(Surname)	(Own Name)	(Father's/Husband's Name)	(Mother's Name)
Residential address of the student:	219, F/6, Goawala Compound Opp. Sahara Hotel, Off. LBS Marg Kurla West , 0, Kurla, Mumbai Suburban, Mumbai, Maharashtra			
	Pincode: 400070	Contact no. 9967097865		

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-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 2014** Examination (Seat No. 20030 )  
**My Date of Birth is 06/01/1994**

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, Santaacruz (East), Mumbai – 400 098 at the earliest.**

Thanking You,

Verified by

Yours obediently

Date:

*Handwritten*  
**I/C DIRECTOR**  
 INSTITUTE OF DISTANCE AND OPEN LEARNING (800)  
 UNIVERSITY OF MUMBAI  
 DR. SHANKAR DAYAL SHARMA BHAVAN,  
 VIDYANAGARI, KALINA,  
 SANTACRUZ (E), MUMBAI-400 098.



*Handwritten Signature*  
 (Student's Signature)

Document printed on Tue Jan 29 2019 16:39:03 GMT+0530 (India Standard Time)



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

paid Rs. 100/-  
R.NO - 3126



UNIVERSITY OF MUMBAI  
INSTITUTE OF DISTANCE EDUCATION

Dr. Shanker Dayal Sharma Bhavan,  
Vidyanagari, Santacruz (East), Mumbai - 400 098.

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

From : College \_\_\_\_\_  
Code : \_\_\_\_\_  
Shri / Smt. Kum. Naaz Sharif Naori Wahidunnisha  
(In Block Letters) (Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)

Residential address of the student Madarsha chawl sharh tri Nagar  
Tasimari Kurla (W) Antheri Road Mumbai 400072

Pin Code : 400072 Tel. No. 7039543238

To  
The Principal / Head of the University Dept.  
(Full Name and Address of the last attended College / University Dept.) patuck gala  
college (E) Santacruz (E) Mumbai 400055

Through Asstt. Registrar (Adm.) I.D.E.

Sir / Madam,

I am to state that I have taken provisional admission to the \_\_\_\_\_ Class in the institute of Distance Education 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 (Div. B Roll No. 113) during the First/Second Term/s of the academic year \_\_\_\_\_ at your College and passed/failed/was awarded A.T.K.T. at the examination held by the University Dept. / College in April/October 2015 Examination (Seat No. 1180435)

My Date of Birth is 10/3/1994

I am enclosing the attested xerox copy of the mark-sheet/s of the above mentioned examination/s. I have also paid the T.C. Fee of Rs. 100/- at the Institute of Distance Education at the time of admission.

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

Thanking you,

Date :



Verified by  
[Signature]  
(Signature of the Adm. Clerk)

Yours obediently,  
[Signature]  
(Student's Signature)

**N.B.:** 1) This Application for Transference Certificate cannot be submitted at the admission counter by only those students who seek admission to I.D.E. on the basis of N.O.C. from the affiliated college or the Department of the University of Mumbai last attended by them.  
2) The old students of I.D.E. are NOT required to fill up this form.

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

UNIVERSITY OF MUMBAI  
Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

13-14  
So. No. 62

Paid Rs. 100/-  
R.No. 3252

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

From : College Code : 279  
Shri / Smt. / Kum. . SHIRWADKAR POOJA VIJAY VAISHALI  
(Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)  
Residential address of PUCHANNA CHAWL, KHANDWALA COMPOUND NEAR PRAGATI NAGAR, VAKOLA BRIDGE, , 0, Andheri,  
the student: Mumbai Suburban, Mumbai, Maharashtra  
Pincode: 400055 Contact no. 8652613858

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-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 **June 2016** Examination (Seat No. 1231565 )

My Date of Birth is 16/08/1995

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:

*Shirwadkar*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (DOO)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098.



*Shirwadkar*  
(Student's Signature)

*Meeta*

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

18-19

12

01/08/2018

# Application for Transfer certificate

To,  
Patuck Gala college,  
Santacruz (E).

This is to inform you about my further admission after graduation in your college done in year 2011.

I hereby request you to provide me Transfer certificate for my further admission done in Bharatiya Vidyapeeth University of pune (Distance Education) currently. (MMS)

Details of college university mentioned below:

Bharatiya Vidyapeeth (Deemed to Be University)

Bharatiya Vidyapeeth Bhavan

6th Floor LBS Marg Pune - 411030

email - distance@bharatiavidyapeeth.edu

Your Sincerely,  
Aamir S Sheikh

X student

Patuck Gala college

GR NO 1414.

9702496858  
9082552455



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

Rs 100/-

14-15 GR. NO. 4369  
9920881741

32

**Bombay Suburban Art & Craft Education Society's  
Sheila Raheja School of Business Management & Research**  
Raheja Education Complex, Kher Nagar, Opp Chhatrapati Shivaji Ground,  
Bandra (East), Mumbai - 400 051. [www.srbs.edu.in](http://www.srbs.edu.in)  
Telephone No.: (022) 61966640 /61966666.

Date: 12/07/2018

APPLICATION FOR TRANSFERENCE CERTIFICATE

From:-

Mr./Ms. ABDUL AZIM KHAN  
7512 KOLOVERI VALLABE,  
KALINA, SANTACRUZ EAST,  
MUMBAI 400029

To:-

The Principal,  
Patuck Gala College of  
Management

Sir,

I was a student of your college for the BMS degree during the academic year 2016-17  
(Roll No. \_\_\_\_\_) and passed the said degree examination held by the University of Mumbai in  
April 2017 (Seat No. 0350076).

I have during this academic year i.e. (2018-2020), sought admission for the MMS (Masters in Management Studies) Two year full time course of the University of Mumbai at the **Sheila Raheja School of Business Management & Research Bandra (E), Mumbai.**

I request you that my Transference Certificate be sent to the **Director, Sheila Raheja School of Business Management & Research Raheja Education Complex, Kher Nagar, Opp. Chhatrapati Shivaji Ground, Bandra (East), Mumbai - 400051** at an early date.

Thanking you,

Yours obediently,

Abdullah

Name of the Student: - Abdul Azim Khan

No. SRBS/ /2018.

Date: - \_\_\_\_\_

Forwarded with compliments to The Principal, \_\_\_\_\_ for favour of early compliance

He /She is also requested to intimate the date of birth of the candidates for our information.

Dr. Vijay Wagh  
Director



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



11/17/2017

SR. NO. 57

~~Mandatory~~

(s. 100b - Pass)

R. No -

ole

GR. NO. 1982

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. .

SHAIKH

(Surname)

KAIFI

(Own Name)

HYDER

(Father's/Husband's Name)

College Code : 01

BILKISH

(Mother's Name)

Residential address of the student:

302 A wing 3rd floor Salim house building  
Mumbai, Maharashtra

Pincode: 400070

Contact no. 9892446704

19773579899

0, Mumbai, Mumbai City,

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- 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 **bachelors in business management** 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 2012** Examination (Seat No. **5485**)

My Date of Birth is 30/09/1991

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

Date:

*H. S. D. S.*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (IDDIL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098.



*[Handwritten Signature]*

(Student's Signature)

*Meeta*

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



Document printed on Fri Nov 17 2017 13:18:01 GMT+0530 (India Standard Time)



paid Rs. 100/-  
R. No - 77

SR. NO. 64  
GR. NO. 3472

**INSTITUTE OF DISTANCE EDUCATION  
UNIVERSITY OF MUMBAI**

Dr. Shankar Dayal Sharma Bhava,  
Vidyanagari Campus, Kalina,  
Santacruz (East), Mumbai - 400 098.

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

From :

Shri/Smt/Kum. BANJAN SHILPA NAGESH KALAWATI  
(In Block Letters) (Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)

Residential Address of the student ROOM NO 11, ANGIELLA CHAWL, KOLIVARI  
VILLAGE, KALINA SANTACRUZ EAST

Pin Code 400098 Tel. No.: 7045152593

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

**Through Asstt. Registrar (Adm.) I.D.E.**

Sir/Madam,

I am to state that I have taken provisional admission to the MCOM Class in the institute of Distance Education 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 T4BMS Class (Div. \_\_\_\_\_ Roll No. \_\_\_\_\_) during the First/Second Term/s of the academic year 2014-2015 at your College and Passed/failed/was awarded A.T.K.T. at the examination held by the University Dept./ College in April/October 2014-2015 Examination (Seat No. 1092219)

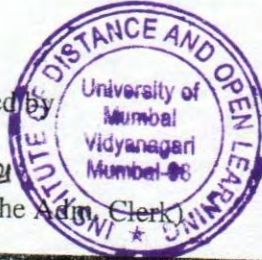
I am enclosing the attested xerox copy of the mark-sheet/s of the above mentioned examination/s. I have also paid the T.C. Fee of Rs. 100/- at the Institute of Distance Education at the time to admission.

I am to request to send my **Transference Certificate** directly to the professor-cum-Director, Institute of Distance Education, University Of Mumbai, Vidyanagari Campus, Kalina, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking you,

Date : 05/04/19

Verified by [Signature]  
(Signature of the Adm. Clerk)



Yours obediently,

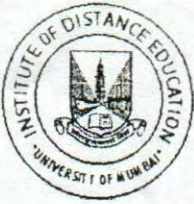
[Signature]  
(Student's Signature)

- NB:
1. This **Application for Transference Certificate** must be submitted at the **admission counter** by only those students who seek admission to I.D.E. on the basis of N.O.C. from the affiliated college or the Department of the University Of Mumbai last attended by them.
  2. The old students of I.D.E. are NOT required to fill up this form.



**I/e Principal**

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



Paid Rs. 100/-  
R.No. 76

ok 30. NO. 65  
GR. NO. 3524

INSTITUTE OF DISTANCE EDUCATION  
UNIVERSITY OF MUMBAI  
Dr. Shankar Dayal Sharma Bhava,  
Vidyanagari Campus, Kalina,  
Santacruz (East), Mumbai - 400 098.

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

From :  
Shri/Smt/Kum. YADAV ANITA INDRAJIT CHAMELI  
(In Block Letters) (Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)

Residential Address of the student NEAR RAM MANDIR, KALINA KOLI VARY  
VILLAGE, CHARLI CHAWL, SANTACRUZ EAST MUMBAI

Pin Code 400098 Tel. No.: 8849244506

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

**Through Asstt. Registrar (Adm.) I.D.E.**

Sir/Madam,

I am to state that I have taken provisional admission to the MCOM Class in the institute of Distance Education 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 79BMS Class (Div. \_\_\_\_\_ Roll No. \_\_\_\_\_) during the First/Second Term/s of the academic year 2014-2015 at your College and Passed/failed/was awarded A.T.K.T. at the examination held by the University Dept./ College in April/October \_\_\_\_\_ Examination (Seat No. 1093904)

I am enclosing the attested xerox copy of the mark-sheet/s of the above mentioned examination/s. I have also paid the T.C. Fee of Rs. 100/- at the Institute of Distance Education at the time to admission.

I am to request to send my Transference Certificate directly to the professor-cum-Director, Institute of Distance Education, University Of Mumbai, Vidyanagari Campus, Kalina, Santacruz (East), Mumbai - 400 098 at the earliest.

Thanking you,



Verified by  
[Signature]  
(Signature of the Adm. Clerk)

Yours obediently,  
[Signature]  
(Student's Signature)

Date : 05/04/2019

NB: 1. This Application for Transference Certificate must be submitted at the admission counter by only those students who seek admission to I.D.E. on the basis of N.O.C. from the affiliated college or the Department of the University Of Mumbai last attended by them.  
2. The old students of I.D.E. are NOT required to fill up this form.



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

8/12/2018

*Paid Rs-100/-  
R.No-1475*

**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 : 279			
Shri / Smt. /Kum.	<b>MANDAL</b>	<b>GUDDI</b>	<b>RANJEET</b>	<b>MANISHA</b>
	(Surname)	(Own Name)	(Father's/Husband's Name)	(Mother's Name)
Residential address of the student:	<b>ROOM NO-528,MILIND NAGAR GAONDEVI VAKOLA, PIPELINE , 0, Mumbai, Mumbai City, MUMBAI, Maharashtra</b>			
	Pincode <b>400055</b>	Contact no. <b>9768730237</b>		

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-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 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 **January 2016** Examination (Seat No. **1106** )

**My Date of Birth is 08/05/1992**

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:

*Hosanna*  
**I/C DIRECTOR**  
INSTITUTE OF DISTANCE AND OPEN LEARNING (DOOL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098.



*Manisha*  
(Student's Signature)

*Meeta*

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



Document printed on Sun Aug 12 2018 14:19:43 GMT+0530 (India Standard Time)

Rs. 100 Paid

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

College Code : 279

From :

Shri / Smt. / Kum. .

GAWADE

SONALI

RAJARAM

PRABHAVATI

(Surname)

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

Residential address of the student:

room no-101, pragati chawal, waghari vada, datta mandir road , , 0, Andheri, Mumbai Suburban, mumbai, Mahara: ' 'ra

Pincode: 400055

Contact no. 7977365882

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-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 **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 **September 2017** Examination (Seat No. 6326391 )

My Date of Birth is **21/02/1996**

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:

*H. G. Gawade*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (DOO)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098



*Gawade*  
(Student's Signature)

Document printed on Wed Sep 12 2018 11:46:45 GMT+0530 (India Standard Time)



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

paid Rs. 100/-  
R.No-1651

<http://idoloo.digitaluniversity.ac/ApplicationStatus/PrintApplication>

UNIVERSITY OF MUMBAI  
Institute of Distance and Open Learning

OL  
SR.No-23

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

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

From : College Code : 279  
Shri / Smt. /Kum. . SHINDE AKSHAY BALWANT ANJALI  
(Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)  
Residential address of B-45, DADAMIYA CHAWL DAWARI NAGAR GATE NO 01, VAKOLA, SANTACRUZ EAST , 0, Andheri,  
the student: Mumbai Suburban, SANTACRUZ, Maharashtra  
Pincode: 400055 Contact no. 8286622683

To,  
The principal / head of the University Dept  
(Full Name and Address of the last attended College / University Dept.): PATUCK COLLEGE OF COMMERCE AND MANAGEMENT,  
NA

Sir / Madam,

I am to state that I have taken provisional admission to the **M.Com-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 **Bachelors of Commerce 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 **September 2017** Examination (Seat No. 6326853 )

My Date of Birth is 06/07/1996

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

Date:

*Shankar*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (IDOL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAVAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E) MUMBAI-400 098



*Anjali*  
(Student's  
Signature)

Document printed on Fri Aug 31 2018 13:04:51 GMT+0530 (India Standard Time)



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

Paid Rs. 100/-  
R.No. 1697  
DA - 05/9/18

UNIVERSITY OF MUMBAI  
Institute of Distance and Open Learning  
Dr. Shankar Dayal Sharma Bhavan,  
Vidyanagari, Santacruz (east), Mumbai-400098

BBE-15/16  
GR.No. 4943  
SR.No. 28  
OC

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

From : College Code : 279  
Shri / Smt. /Kum. . VERMA ANTIM BANS HIDHAR SUMAN  
(Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)  
Residential address of the student: 96 GHISARANCHI CHAWL DAYAMA MARG KHERWADI NR GANPATI MANDIR , 0, Andheri, Mumbai  
Suburban, MUMBAI, Maharashtra  
Pincode: 400051 Contact no. 8369233235

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-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 **BBI** 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 2018** Examination (Seat No. **3186652** )

My Date of Birth is **25/06/1997**

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:

*forward*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (DOOL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098



*Antim*  
(Student's Signature)

Document printed on Sat Sep 29 2018 16:31:08 GMT+0530 (India Standard Time)



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

Paid Rs. 100/-  
R.No. 1716

15-16 OG

UNIVERSITY OF MUMBAI

Institute of Distance and Open Learning

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

Sr.No. 32.

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

From : Shri / Smt. / Kum. . PATIL DHIRAJ RAMCHANDRA BEBITAI College Code : 279  
(Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)  
Residential address of the student: RM NO-6, GAJANAN KRUPA SOCIETY SHINGRE WADI BAIL BAZAR KURLA WEST, 0, Kurla, Mumbai  
Suburban, Mumbai, Maharashtra  
Pincode: 400070 Contact no. 7738752870

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-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 **April 2018** Examination (Seat No. **3186400** )

My Date of Birth is **07/03/1998**

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:

*Horwade*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (DOOL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098



*Bebitai*  
(Student's Signature)

Document printed on Tue Oct 09 2018 16:25:04 GMT+0530 (India Standard Time)



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



Paid Rs. 100/-  
R.No. 1724

UNIVERSITY OF MUMBAI  
Institute of Distance and Open Learning

GR.No. 4930  
SR.No. 83  
ole

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. . CHANDRAKANT AAKASH SAYANNA KAUSHALYA  
(Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)  
College Code : 279  
Residential address of the student: 202 SUKHASAGAR SRA CHS GOLIBAR ROAD SANTACRUZ EAST, 0, Andheri, Mumbai Suburban,  
MUMBAI, Maharashtra  
Pincode: 400055 Contact no. 7738973936

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-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 **BBI** 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 2018** Examination (Seat No. **3186494** )

My Date of Birth is **17/12/1996**

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:

*Horadon*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (0001)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098



*[Signature]*  
(Student's Signature)

Document printed on Sat Sep 29 2018 17:02:09 GMT+0530 (India Standard Time)



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

Paid Rs. 100/-  
R.No - 1728  
S.No - 34

UNIVERSITY OF MUMBAI

Institute of Distance and Open Learning

GR.No. 4941

Dr. Shankar Dayal Sharma Bhavan,

Vidyanagari, Santacruz (east), Mumbai-400098

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

From :

College Code : 279

Shri / Smt. /Kum. .

VARMA

ANNU

VANSHIDHAR

SUMAN

(Surname)

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

Residential address of the student:

PLOT NO. 96 GHISARANCHI CHAWL DAYMA MARG KHERWADI , 0, Andheri, Mumbai Suburban, BANDRA EAST, Maharashtra

Pincode: 400051

Contact no. 8879614805

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-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 **BBI** 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 2018** Examination (Seat No. **3186650** )

**My Date of Birth is 15/12/1997**

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:

*H. K. D. S.*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (IDOL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098.



*Annu*  
(Student's Signature)

Document printed on Sat Sep 29 2018 14:56:07 GMT+0530 (India Standard Time)



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

SR.No. 56

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

15-16 GR.No. 4955-  
fs. look  
paid.  
R.No - 2280

From :

College Code : 279

Shri / Smt. /Kum. .

JADHAV

DEEPALI

ANANT

ASHWINI

(Surname)

(Own Name)

(Father's/Husband's Name)

(Mother's Name)

Residential address of the student:

HANUMAN TEKDI GUPTA CHAWL GATE NO. 2 SANTACRUZ EAST MUMBAI , 0, Mumbai, Mumbai  
City, MUMBAI, Maharashtra

Pincode: 400055

Contact no. 9833205239

To,

The principal / head of the University Dept

(Full 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-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 BBI** 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 2018** Examination (Seat No. **3186133** )My Date of Birth is **25/10/1991**

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

Date:

*for review*  
I/C DIRECTOR  
INSTITUTE OF DISTANCE AND OPEN LEARNING (IDOL)  
UNIVERSITY OF MUMBAI  
DR. SHANKAR DAYAL SHARMA BHAVAN,  
VIDYANAGARI, KALINA,  
SANTACRUZ (E), MUMBAI-400 098.



*Deepali*  
(Student's  
Signature)

Document printed on Fri Aug 31 2018 19:34:05 GMT+0530 (India Standard Time)



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



paid Rs. 100/- GR. NO. 3027  
 R. NO - 3049 SR. NO - 59  
**UNIVERSITY OF MUMBAI**  
**INSTITUTE OF DISTANCE EDUCATION**

Dr. Shanker Dayal Sharma Bhavan,  
 Vidyanagari, Santacruz (East), Mumbai - 400 096.

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

From : College Code : \_\_\_\_\_  
 Shri / Smt. Kum. SHARMA MUKESH RAJENDRA AJHUL  
 (In Block Letters) (Surname) (Own Name) (Father's/Husband's Name) (Mother's Name)  
 Residential address of the student SANKATA PANDRY CHAWL SAN ROAD WILIBAR SANTACRUZ (E) MUMBAI  
 Pin Code : 400055 Tel. No. 9711546306  
 To  
 The Principal / Head of the University Dept.  
 (Full Name and Address of the last attended College / University Dept.) \_\_\_\_\_

Through Asstt. Registrar (Adm.) I.D.E.

Sir / Madam,  
 I am to state that I have taken provisional admission to the M. COM. Class in the institute of Distance Education 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 \_\_\_\_\_ Class (Div. \_\_\_\_\_ Roll No. \_\_\_\_\_) during the First/Second Term/s of the academic year \_\_\_\_\_ at your College and passed/failed/was awarded A.T.K.T. at the examination held by the University Dept. / College in April/October \_\_\_\_\_ Examination (Seat No. \_\_\_\_\_)

My Date of Birth is 30/03/1992

I am enclosing the attested xerox copy of the mark-sheet/s of the above mentioned examination/s. I have also paid the T.C. Fee of Rs. 100/- at the Institute of Distance Education at the time of admission.

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

Thanking you,

Verified by



Yours obediently,

Date: 21/02/2019

(Signature of the Adm. Clerk)

20/02/19

(Student's Signature)

*Mukesh Sharma*

**N.B.:** 1) This **Application for Transference Certificate** must be submitted at the admission counter by only those students who seek admission to I.D.E. on the basis of N.O.C. from the affiliated college or the Department of the University of Mumbai last attended by them.  
 2) The old students of I.D.E. are **NOT** required to fill up this form.



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