

**APPLICATION FORM**  
**TRANSFER CERTIFICATE / LEAVING CERTIFICATE**

To,  
Principal,  
Pune District Education Association's  
Shankarrao Ursal College of Pharmaceutical  
Sciences and Research Centre, Kharadi, Pune-411014

**Subject:** Request for issue of Transfer Certificate / Leaving Certificate

Respected Sir,

I the undersigned would like to state that, I had studied in this college from the academic year \_\_\_\_\_ to \_\_\_\_\_. I have passed/ failed (D. Pharm / B. Pharm / M. Pharm / Ph. D.) during the year \_\_\_\_\_ to \_\_\_\_\_.

My details are as follows

**Name of student**.....

**Address**.....

**Class**..... **PRN No.** 2009 **GRN No.**.....

**Year and Month of Passing (April-May / Oct-Dec)**.....

**Reason to apply for T.C. /L.C.** .....

I request you to please issue Transfer Certificate / Leaving Certificate at the earliest/

Kindly consider and oblige.

Thank You

Yours Faithfully

**Signature of Student** \_\_\_\_\_