

रा□□ाय ाै। यो। गाक्ष । सं। थान नागाल ह

NATIONAL INSTITUTE OF TECHNOLOGY NAGALAND Chumukedima, Dimapur Nagaland-797 103

OFFICE OF THE DEAN (ACADEMIC) ACKNOWLEDMENT OF THE RECIPT OF CERTIFICATE(S)

1. Name of the Student	:
	(as registered in the Institute Records in Block Letters)
2. Name of the Degree	: B.Tech. / B.S.M.S. / M.Tech.
3. Department	:
4. Registration Number	
5. Month & Year of Passin	g:
6. List of Certificates requested received	
7. Certificate Number(s):	
	
	DECLARTION
I,	, hereby acknowledge the receipt of the above
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Signature of the Candida	te/Authorized person:
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