

राष्ट्रीय प्रौद्योगिकी संस्थान नागालैंड
NATIONAL INSTITUTE OF TECHNOLOGY NAGALAND
Chumukedima, Dimapur
Nagaland-797 103

OFFICE OF THE DEAN (ACADEMIC)
APPLICATION FOR OBTAINING 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 :

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5. Month & Year of Passing :

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6. List of Certificates requested for : Degree / Provisional Degree / Grade Cards / Transcript / Migration / Transfer / Conduct

7. Request the certificate in: Person Absentia (By post / Through Authorized Person)
(Tick the appropriate)

8. Address for Correspondence: _____

Pin Code:

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9. Email id:

Mobile No.:

Place:

Date:

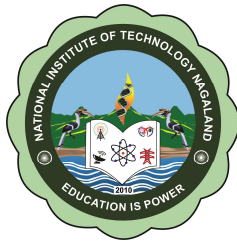
Signature of the Candidate

Enclose Xerox copy of:

UG Students : Attested copy of Plus Two or equivalent Certificate and Photocopy of the NIT Nagaland Identity card

PG Students : Attested copy of Basic Degree Viz. BE / B.Tech. / Other eligible Degree and Photocopy of the NIT Nagaland Identity card

Note: Application without the above enclosures will not be entertained at any cost.



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**DECLARATION IN CASE OF RECEIVING CERTIFICATE(S) THROUGH
AUTHORIZED PERSON/ BY POST**

(To be filled by the candidate; tick wherever applicable)

I, ----- hereby authorize ----- to receive the
above mentioned certificate(s) on my behalf in my absence.

My representative understands that he / she would be required to produce his / her ID
card or valid proof for identification and record purpose when collecting the said
document for me.

I also confirm that my representative shall have the authority to sign for
acknowledgement of the receipt of the said document.

I understand that I shall be fully responsible for the undelivered, if any, of the said
document from my representative/through post.

Signature of the candidate with date

Signature of the authorized person