



কৃষ্ণকান্ত সন্দিকৈ ৰাজ্যিক মুক্ত বিশ্ববিদ্যালয়
KRISHNA KANTA HANDIQUI STATE OPEN UNIVERSITY
Guwahati - 22

Study Centre where admitted

Study Centre to which transfer sought

1. Name :
2. Enrolment No. (if issued)
3. Phone No.:
4. Email :
5. Details of Programme : (i) Name : (ii) Year of Admission :
(iii) Subject(s) : (iv) Semester :
6. Details of Study materials received :
(i) (ii) (iii)
(iv) (v) (vi)
7. Amount of fee already paid :
8. Amount of Examination fee (if paid) :
9. Reason for transfer :
10. Whether the subjects(s) under the programme as mentioned at 5(iii) above are offered in the Study Centre to where transfer is applied : Yes/No.
11. Whether the learner has submitted any Home Assignment(s) at the original Study Centre : Yes/No.
(If yes, the list of Home Assignment(s) received by the Coordinator is to be submitted along with this form)

I hereby declare that the statements made as above are true to the best of my knowledge.

Signature of the Learner

Transfer is recommended or any other comment

No objection to admission or any other comment

Co-ordinator/In-charge of the Study Centre

Seal

Co-ordinator/In-charge of the Study Centre where admission is sought

Seal

For University Office Use

Permitted / Not permitted

Course fees to be paid to the new Study Centre

Fees to be recovered from original Study Centre

Total

Exam. fees to be paid to the new Study Centre

To be received by the original Study Centre

Total

Dean (Study Centre)