

Cashier Please accept Rs.

Dated:



GOVERNMENT SMALL INDUSTRIES DEVELOPMENT CORPORATION शासकीय लघु उद्योग विकास महामंडळ

Form of application for issue of MIGRATION CERTIFICATE. (the Writing should be legible). Government Small Industries Development Corporation Maharashtra

1. Name of the Applicant (In Block Letters): _____
2. Father's Name: _____
3. Residential Address: _____

4. Name of examination taken _____ Year _____
5. Course _____ Course Duration: _____
6. GSIDC Roll No. _____
7. Result: Passed / Failed / Absent: _____
8. Enrollment No.: _____
9. Name of the Institute from which the candidate took the last examination: _____
10. Details of the fee deposited: - DD/PO No. _____ Date: _____ Amount _____
11. (a) Whether the certificate is to be collected from the Council in person or to be sent by Post
please write –In person/By post

PH (R)	_____
PH (M)	_____

- Note: (i) All the particulars required should be filled carefully by the applicant. LBSPSTC will not be responsible for any delay in case the form is not complete in all respects.
- (ii) **A Fee of 500/- through Demand Draft / Pay order in favour of SHASKIYA LAGHU UDYOG VIKAS MAHAMANDAL NAGPUR**
- (iii) Please Attach Attested Copy of Final Year mark sheet & Provisional Certificate issued by concerned Paramedical Institute.
- (iv) **The Complete filled & duly verified application in all respect may be submitted in Government Small Industries Development Corporation India on any working day from 2:00 P.M to 4:00 P.M.**

Dated: _____

(Signature of Applicant)

(TO BE FILLED IN BY THE INSTITUTION LAST ATTENDED)

Certified that the above entries made by the applicant are correct & duly verified from office record, and that he / she has paid Paramedical Courses dues up to

_____ (Mention month and Year)

**Seal and
Signature
Principal**

(To be filled by the Council's Office)

Fee _____ received vide receipt No. /D. D No. _____ Dated: _____

SIGNATURE OF THE CASHIER