



# COCHIN UNIVERSITY OF SCIENCE AND TECHNOLOGY

## APPLICATION FOR MIGRATION CERTIFICATE

*(Please read the Instructions overleaf carefully, before filling this form)*

1.	Name of the applicant in full, as enrolled in the University records (in block letters)				
2.	Date of Birth (DD/MM/YYYY)		3.	Gender (Male/ Female)	
4.	Address to which the Migration Certificate should be sent (in <b>BLOCK</b> letters & PIN CODE to be compulsorily indicated)				
5.	Contact references: (i) Land line		STD code:                      No:		
	(ii) Mobile No		(iii) e-mail address		
6.	<b><u>Details of fees paid:</u></b> (see Instruction No.3)				
(i)	Amount of fees paid (in figures)		Rs.		
(ii)	If remitted in <b>Cash</b> at University Cash Counter, Cash Receipt reference (copy of Receipt to be enclosed)		Receipt No:		Dated:
(iii)	If remitted by <b>Demand Draft</b> , Demand Draft reference (see Instruction No.5 - <b>IMPORTANT</b> )		DD No:		Dated:
7.	<b><u>Details of Examination passed:</u></b>				
	Name of the Degree	Subject / Branch	Class	Reg. No	Month / Year of passing final semester
			Month / year of back semester, if any cleared later on		
8.(i)	Name of the Department/Institution last studied				
(ii)	Course of study				
(iii)	Period (academic years) of study /research		From:		To:
9.	Name of father or guardian				
10.	Purpose of Migration				

Station:

Date :

**Signature of the Applicant**

(For Office use)

**Verification Report on the examinations appeared by the candidate**

Name of the Course	Reg. No. of the candidate	Month & Year of the Semester Exams last appeared by the candidate		Result (passed / failed)	Classification	Remarks
		Semester	Month & year			
		I				
		II				
		III				
		IV				
		V				
		VI				
		VII				
		VIII				
		IX				
		X				

Assistant

Section Officer

Asst. Registrar (Exams)

**Endorsement by the Principal of the College/Head of the Department**

I have no objection to a migration certificate being issued to the student. The leaving (transfer) certificate No..... dated ..... has been issued to the student whose conduct has been satisfactory throughout.....

Signature of the Principal/Head of the Department

College/Department Seal

College/Department

Date

## INSTRUCTIONS TO CANDIDATES

1. The endorsement (*on page 2 of the application*) by the Principal of the College/Head of the Department where the candidate studied last shall be obtained by the candidate before submitting the application for Migration Certificate to the Office of the Controller of Examinations, Administrative Office, CUSAT, Kochi 682022.
2. **A self addressed and stamped (Rs. 25/-) envelope (25x12 cm) should also be enclosed along with the application for Migration Certificate.**
3. For further details regarding fee please visit the following link [http://cusat.ac.in/view\\_exam\\_notif.php?id=52](http://cusat.ac.in/view_exam_notif.php?id=52)
4. Fee can be remitted either at the University Cash counter, Administrative Office, CUSAT, Thrikkakara or sent by way of Demand Draft.
5. If the fee is sent by way of Demand Draft (DD),
  - (i) The DD should be **drawn on**: (a) State Bank of Travancore (SBT) or (b) State Bank of India (SBI) or (c) Any associate bank of SBI
  - (ii) **In favour of**: The Registrar, CUSAT
  - (iii) **Payable at**: (a) If drawn on SBT – Cochin University Campus branch (Code: 70235); (b) If drawn on SBI or any associate bank – Ernakulam.
  - (iv) The DD should be enclosed to this application form
6. Migration certificate will not be issued to a candidate more than once.