

REQUEST FORM FOR NO DUES CERTIFICATE

Date : _____

Student Name : _____ SRN : _____

Contact No. : _____ Email : _____

Year of Studying in : _____ PRN : _____

Program Name : _____ Department : _____

Faculty : _____ Year of Admission : _____

Date of completion of program / exit from program : _____

Signature of Student

NO DUES CERTIFICATE TO BE ISSUED BY

Sr. No	Department	Dues if any	Signature & Name of Official
1.	Head of the Department		
2.	Library		
3.	Examination Section Sem I Sem II	Please Tick (✓) Appeared / Not appeared Appeared / Not appeared	
4.	Systems Department		
5.	Students' Activity /Extra Curricular Activities		
6.	Hostel		
7.	Estate Manager / Campus Management		
8.	Students Facilitation Center		
9.	Accounts Section		

Registrar
Vishwakarma University, Pune

(To be returned to Student Section before leaving campus)