



GOVERNMENT POLYTECHNIC, MALVAN

Pin - 416 606 Dist. Sindhudurg. ☎ 02365 - 252223 / 252027
(Maharashtra)



LEAVING CERTIFICATE

Registration No. _____ L C. No. _____

1. Name of the Institute : Government Polytechnic, Malvan.
2. Name of the Candidate : _____
(in full) (Surname) (First name) (Middle name)
3. Race - Caste (Sub - caste) : _____
4. Place of Birth : _____
5. Date of Birth According to : _____
the Christian era (Date) (Month) (Year)
In words : _____
6. Nationality : _____
7. Institution last attended : _____

8. Date of Admission : _____
9. Enrollment No. : _____
10. Progress : _____
11. Conduct : _____
12. Date of leaving Institute : _____
13. Course and year in which : _____
Studying and since when : _____
14. Reason for leaving this : _____
Institute : _____
15. Remark : _____

Certificate that above information is in accordance with the institute record.

Place : Malvan

Date :

Seal

Principal

Govt Polytechnic, Malvan

Note :- No Changes in any entry in this certificate shall be made except by this issuing authority. Infringement of this requirement is liable to involve the imposition of penalty even that of rustication.