

**Ministry of Micro, Small and Medium Enterprises  
Office of the Development Commissioner (MSME)**

**APPLICATION FOR OBTAINING NO OBJECTION FOR HIGHER STUDIES**

1. Name of the Employee
2. Designation
3. Name of the Div./Section
4. Name of the Course
5. Duration of Course
6. Name of Institution
7. Whether the Course is part-time/full-time/correspondence/private
8. If the course is part/full time, class timings
9. Whether already permitted for any course, if so, status of the course- whether completed /left incomplete/ un-successful

Signature of Employee

Remarks of Controlling Officer

Signature of Controlling Officer  
Name  
Designation