

# APPLICATION FOR EQUIVALENCE CERTIFICATE

(12<sup>th</sup> / HSC Equivalence)

To,  
The Secretary,  
Maharashtra State  
Board of Technical Education,  
49, Kherwadi, Bandra (East)  
Mumbai – 400051

## Sub: To issue the Equivalence Certificate

Sir,

(To be filled by the Student)

I Undersigned kindly request you to issue me the Equivalence Certificate.

Name of the Student: \_\_\_\_\_

Address of Student: \_\_\_\_\_

\_\_\_\_\_ Pin code: \_\_\_\_\_ Phone No. \_\_\_\_\_

Name of Course: \_\_\_\_\_

Mode of Learning: Regular / Distance / Correspondence / Part-time :

Duration of Course : \_\_\_\_\_

Name of the Polytechnic / Institute: \_\_\_\_\_

Type of Institute: Government / Private (Un-aided) / Private (aided)

Status of Institute : Affiliated to Board or University / Autonomous

Name of the Board / University : \_\_\_\_\_

Year of Passing: \_\_\_\_\_

Status of Board / University: Government / Private

### Documents required for Verification and Record

1. Attested Xerox copy of Mark List of all Semester / Years Diploma in Engg. / Pharmacy.
2. Attested Xerox copy of Provisional / Final Board Certificate.

**Important Note:** The candidate may be asked to produce the original Documents for verification, if deemed it necessary. For more information about Equivalence, please refer to “HSC Equivalence” on website [www.msbte.org.in](http://www.msbte.org.in)

Yours faithfully,

Signature:

Name:

### For Office Use Only

To Account Office

**R-010** Kindly accept the Amount of **Rs. 200/-** for the Equivalence Certificate

Head Clerk / Superintendent

The above Amount is accepted as per the Receipt No. \_\_\_\_\_

Date:

Cashier / Accountant  
Signature