

**To,**  
**The Controller of Examination,**  
**NIILM University,**  
**Kaithal**

Sir,

Kindly issue the documents as per the details given below.

Registration number	
Course	
Candidate name	
Father's/Guardian'sname	
E-mail ID	
Contact number	
Addressforcommunication	

Details of documents :

1.	
2.	
3.	
4.	
5.	
6.	

Date of submission of application :(valid for 30days)

Student's Signature

Sr.No.	Clearancefrom	AuthorizedSignatory	Date
1.	Course Coordinator		
2.	Library		
3.	Hostel		
4.	Accounts		
5.	Admission (Fee)		
6.	Admission (Documents)		
7.	GGGSCoordinator		

Approved by

Issued by

Received by