

### Procedure for Obtaining Transcript/s

**(A) Procedure:**

To get a transcript, write an application in prescribed format addressed to the **Controller of Examinations**, MIT Art, Design & Technology University, Pune.

**(B) Documents:**

For issuing transcript following documents are needed to be enclosed with the application:

1. A self-attested photocopy/photocopies of all the **Grade Card/s** including failed.
2. Payment Receipt / Bank Challan / Online Receipt as applicable.
3. Concerned Candidate must send / submit the application along with above mentioned documents and bank challan / receipt of payment made to the following address:

*Controller of Examinations  
Examination Department  
MIT Art, Design and Technology University  
Rajbaug, Loni Kalbhor,  
Pune – 412 201, Maharashtra State*

**(C) Charges/Fees:** Candidate must pay applicable charges as mentioned below in the Account Department of the University OR through Bank Challan.

1. Rs. 1000/- for first copy of Transcript.
2. Rs. 500/- for each additional copy / copies.

**(D) Issue of Transcript:** Transcript will be issued to the Candidate within a week from the date of receipt of the complete application form in all respect.

**(E) Clarification:** Candidate can send their queries if any to: [transcript@mituniversity.edu.in](mailto:transcript@mituniversity.edu.in)



(Dr. Dnyandeo Neelwarna)  
**Controller of Examinations**

**APPLICATION FORM FOR OBTAINING TRANSCRIPT**

Date:     /     /

**A) General Information:**

Student Enrolment No.: \_\_\_\_\_

Full Name: \_\_\_\_\_

Program Name: \_\_\_\_\_

Passing Month & Year: \_\_\_\_\_

No of copies required: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City / Village: \_\_\_\_\_ Pin: \_\_\_\_\_

Contact No.: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**B) Reason for seeking the Transcript:** \_\_\_\_\_

\_\_\_\_\_

**Declaration: I solemnly declare that the details provided above are correct to the best of my knowledge. I request you to please issue me the Transcript/s as mentioned above.**

Name & Signature of the Student

\_\_\_\_\_

**For Examination Office Use**

Approved:      Not Approved:

\_\_\_\_\_  
**Checked by**  
**(Name & Signature)**

\_\_\_\_\_  
**Verified by**  
**(Name & Signature)**

\_\_\_\_\_  
**Controller of Examinations**  
**(Name & Signature)**

**Transcript Issued On:** \_\_\_\_\_

**By Hand:** \_\_\_\_\_

**Through Post: Receipt No.:** \_\_\_\_\_

**Signature of Student:** \_\_\_\_\_