

Registration No :	<input type="text"/>
Student Name :	<input type="text"/>
Centre Code :	<input type="text"/>
Centre Name :	<input type="text"/>
Place :	<input type="text"/>
Contact No :	<input type="text"/>
Email ID :	<input type="text"/>

To,
The Additional Registrar
Sikkim Manipal University
Directorate of Distance Education
1st floor, Syndicate House, Manipal-576104

Change of Name

Dear Sir,

1. My name has been spelt incorrectly in official records as instead of I am enclosing my Xth, XIIth and Graduation certificates as proof of my name and request you to incorporate the same in the official records.

(OR)

2. I have changed my name from to effective from The affidavit and paper advertisement as a proof of the same are enclosed for your information. Please make the necessary changes in your official records and send all future communication under my new name.

Date: ____/____/____

Signature of the Student

Enclosure: i) Affidavit

ii) Copy of paper advertisement

iii) Rs. 300 in Demand Draft in favour of Sikkim Manipal University, DE payable at
Udupi/Manipal

iv) Old Identity card

Note: i) Enclosure of demand draft for Rs. 300/- is required only in the case of S. No. 2 above.
ii) Request for name correction will not be entertained after the completion of course.