Geethanjali College of Engineering and Technology
Cheeryal (V), Keesara (M), Medchal Dt. TS -501301
_____ Department
Requisition form for LoRs for Higher education

Date : _____

I hereby request HoD to give permission for issuing the LoRs by the Department faculty.
My details are:

1. Name of the student:
2. Roll No.
3. Years of study:
4. Phone No.
5. Email Id:
6. Parent Name:
7. Parent phone No.
8. Parent Email Id:
9. Present address: Permanent address:

10. Planning to go to which countries: US / Canada / Australia / UK / _____
11. Examinations passed : GATE /CAT/ GRE / TOEFEL / IELTS / _____
12. Score cards – copies submitted to Dept. Alumni coordinator: Yes / No
13. Course planned for study: MS / M.Tech / MBA / ____
14. Recommendations requesting from faculty:
    Faculty Name: Signature:
    a.
    b.
    c.
    d.
15. Any other information:

I hereby confirm that I will submit the I20 / Admission letter copy to the Department Alumni coordinator, as soon as I get the Admission.

Signature of the student: Signature of the Alumni coordinator

To HoD : for kind approval to issue the LoRs and giving ___Nos. Department Letter-heads for the LoRs.

Signature of the HOD