Geethanjali College of Engineering and Technology

(Cheeryal (V), Keesara (M), Medchal Dt. TS -501301)

Department of ECE

Requisition form for LoRs for Higher education

| | | | | Date: |
|---------------------------|--|-------------------------------------|---|--------------------------|
| | y request the HoD to give per ned below, to enable me apply | • | • | • |
| | ails are: | , | , | |
| 1. | Name of the student: | | | |
| 2. | Roll No.: | Years of study: | | |
| 3. | Mobile No.: | Email | Email Id: | |
| 4. | Parent Name: | Parent phone No.: | Pa | rent Email Id: |
| 5. | Present address: | Permanent address: | | |
| 6. | LinkedIn Profile: | | | |
| 7. | Country in which Master's Program is planned to do: US / Canada / Australia / UK / | | | |
| 8. | Examinations passed : GATE /CAT/ GRE / TOEFEL / IELTS / | | | |
| 9. | Score cards – copies submitted to Dept. Alumni coordinator: Yes / No | | | |
| 10. | Course planned for study: MS / M.Tech / MBA / | | | |
| 11. | 11. Faculty Members from whom recommendations are requested: | | | |
| | Name of the Faculty | Course Taught | Grade Obtained* | Signature of the Faculty |
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| | * Marks Memos are to be att | tached as a Proof. | | <u> </u> |
| 12. | Any other information: | | | |
| | y confirm that I will submit the I get the Admission. | ne i20 / Admission letter co | ppy to the Department | Alumni coordinator, as |
| 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