APPLICATION FOR CREDIT TRANSFER (CT)/ LATERAL ENTRY (LE)

For the applicants seeking CT/ LE in accordance with
National Skill Qualification framework (NSQF)

Name of the Applicant : _____

Programme Name : _____Year Applied : _____ Exemption Year(s) : _____

TO BE FILLED BY THE APPLICANT		
Exempted Year	Marks Obtained	Marks Out Of
Year 1		
Year 2		
Year 3		

TO BE FILLED BY THE UNIVERSITY
Comments (if any) : _____
_____
_____
_____

Year	Details of Previously Earned Credits (Passed Subjects)

Subject/ Credits at eq. level	Granted/ Not Grated

(For office use only)	
Name of the Additional Subject(s)/ credit(s) to be cleared	Name of the Additional Subject(s)/ credit(s) to be cleared

DECLARATION BY THE APPLICANT

I hereby declare that the details mentioned by me are correct and true to best of my knowledge and belief. I have completed all the formalities for seeking admission under Credit Transfer/ Lateral entry scheme of the University under National Skill Qualification Framework and I am ready to attend the part of programme with Arunachal University of Studies in accordance with University Rules & Regulations. I further declare that the University is empowered to cancel my candidature or take any other appropriate action including legal action, if information supplied by me including submitted documents found to be incorrect, misleading or counterfeited. Disputes if, any, shall be subjected to Namsai, Arunachal Pradesh.

Date & Place Signature of Applicant

Fee Details :	A. CT/ LE Fee	:-	**Rs. 2000/-**
	B. Total No. of Additional Subject(s)	:-	**Rs.** _____
	C. Additional Fee Per Subject	:-	**Rs. 500**
	D. Total CT/ LE Fee	=	A+(B*C) = **Rs.** _____
Instrument Details :	DD No. :- _____, Date :- _____, Issuing Bank :-_____		