

Shri Ram Group of Collges, Muzaffarnagar

STUDENT'S NO DUES FORM (Applicable only for Passing out Students)

Name: _____ Father's Name: _____
Enrolment No: _____ Roll No: _____ Course: _____
Branch: _____ Current Mailing Address _____
Email: _____ Phone No: _____ Mob. No: _____

S.No.	Deptt./Lab	Dues/ No Dues	Name of Assistant/ In charge	Signature of Assistant/ In charge With Date	Signature of HOD/ Authorized Person
1.	Deptt. of Bioscience Sciences				
2.	Deptt. of Commerce				
3.	Deptt. of Education				
4.	Deptt. of Management				
5.	Deptt. of Computer Science & Engg.				
6.	Deptt. of Journalism				
7.	Deptt. of Electronics & Communication Engg.				
8.	Department of Architecture				
9.	Deptt. of Mechanical Engineering				
10.	Deptt. of Law				
11.	Library				
12.	Sports				
13.	Accounts				
14.	Registrar officer (for I-Card)				

In case of loss of I-Card:

I certify that my Identity card is lost. I will be responsible if the same is misused by anyone. I have lodged the complaint / not lodged the compliant for its loss with police.

(Signature of student with date)

(Signature of Office Staff with date)

Name:

(Signature of Registrar with date)

(Director)