

## **Authorization Letter**

To,									
The Controller of Examinations,									
Manipal University Jaipur,								Affix Latest	
Jaipur, Rajasthan								Passport size photograph	
								photograph	
Respected Sir/N	Madam,								
I,		(Registration No					) hereby authorize that		
Mr./Ms./Dr						to col	lect my		
						ce	rtificate/s o	n my behalf.	
		Deta	ils of Receive	r (Fill in Ca	apital Letters	s)			
Full Name of	Receiver:								
Relation:									
Reg. No.: (if st	tudent of MUJ)								
Programme/S (if student of MU	pecialization JJ)								
Full Address:									
Contact No.:			Email ID:						
Self-attested id proof must be attached (any one)		Type:-	Pan Card	Driving License	Aadhar Card	Voter Id	Passport Id	Other Valid ID	
		Receiver							
		Applicant							
I hereby declare	e that all info		n the authoriza	ation letter i	s true and cor	rect.			
Thanking You,									
Name of Studen	nt :								
Registration No	o. :.								
Program/Specia	alization :								
Mobile No. :									
E-Mail Id :									
Place :									
Date :						Si	ignature (A	applicant)	