

DIRECTORATE OF TECHNICAL EDUCATION KERALA

Application for Equivalency/Higher Qualification certificate

1	Name of the applicant	
2	Address for communication	
3	Phone No	
4	E mail id	
5	Course attended	
6	Year of study	
7	Admission No	
8	Register No	
9	Year of completion	
10	Mode of study	Regular/ Part time/Distance/ Evening
11	Name of the Institution	
12	Name of the body Univeristy/Board/other who issued the certificate	
13	Name of the course to which the certificate is sought	
14	Equivalency is sought for employment or higher education	
15	Attested copy of certificate and mark lists attached	Yes/No

Place :

Signature:

Date :

Name: