	Mr./ Ms
	Address:
	Mobile:
	Email ID:
	Date:
To, Principal,	
Pravin Gandhi College of Law,	
Mithibai College Campus, 8th floor,	
Bhaktivedant Swami Marg, Vile Parle (W), Mumbai-400056.	
viie Faire (w), Munibai-400030.	
Subject: Application for	or handover the document
Respected Madam,	
This is to inform you that I am / was student of	B.A., LL.B. / LL.M. program having
Roll No Div SAP No	in Academic Year
Y1	
I have to request you to kindly provide my	to the person authorised
below. I am unable to visit college office due to	·
Yours faithfully,	
Tours faithfurly,	
(Signature of Student)	
(Signature of Student)	
(Name and Signature of Parent)	
Person authorised to collect document:	
Na	me Signature
Attach copy of Identity card of authorised person i.e.	Aadhar / Pancard / Driving Licence / College ID, etc.
[For O	Office Use]
Remarks:	
Approved by :	

From: