



CENTRE FOR DISTANCE EDUCATION
ANNA UNIVERSITY:: CHENNAI-25.

Ph: 044-22357216

APPLICATION FOR CHANGE OF STUDY CENTRE

Name of the Student :
Roll No. :
Batch/ Set :
Mob. No :
Course : MBA/ MCA/ M.Sc
Semester : I / II / III / IV
Specialization (if any) :

Name of Study Centre (Currently Studying) :

Reason for Change of the Study Centre :
(Copy of valid proof is enclosed)

Name and address of Study Centre :
(Where the Candidate wants to be transferred)

Kindly accept my request for Change of the Study Centre.

Date: Signature of the Student

Encl:

- ❖ Online Payment Receipt
- ❖ Copy of valid proofs

1. Change of the study center will be allowed only if the specialization required by the student is available
2. Request received in middle of semester & with in Chennai study centre will not be permitted.
3. Payment of **Rs. 100/-** should be made through Online Mode and the receipt should be enclosed along with this.

**RECOMMENDATIONS OF THE COORDINATOR OF THE STUDY CENTRE [NO DUES]
(CURRENTLY STUDYING)**

Date: Signature of the Coordinator
Study Centre Seal Name in Block letters:

(FOR OFFICE USE ONLY)

Study Centre Changed/ Not Changed

Approved/ Not Approved

SET-INCHARGE

DIRECTOR (CDE)

Date: