Request for Correction in DMC by LC

To be filled by Learning Center	For Office Use
Student Name	Case No
Father Name	
Course	Request received on in office
University Roll No	Dated//06.
LC Name	Case sent to Dealing Hand
ARLFC	(Name)
Phone & Mobile No.	· · · · · · · · · · · · · · · · · · ·
E-Mail id	
Original DMC's submitted for : -	DMC's No. Issued after correction:-
Semester Previous DMC's No.	
1	
2.	
3.	
4	
5	
6	
Correction Required:	
List of Encl.:	
1. Matriculation Certificate(attested) (Yes/No)	
2. Result(Tabulation Sheet attached)(Yes/No)	
()	Date of Issue:
	Date of issue
(Signature & Seal of LC)	
(* 8 **** * * * *)	
FOR RLFC/ARLFC Use:	
Authority letter from RLFC/ARLFC attached (Yes/No)	
Name of authorized person	
I have received the DMC of (Name)for(Course)	
Received By (Name) Sign	Date
Designation	
Comments:	
Punjab Technical University, Jaland	har
	Dated//06
We have received the application of (RLFC/ARLFC)	in this office
Please come to collect the DMC's on//06.	
Received by Dated	