

## **OFFICE OF THE DEAN (ACADEMIC)** NATIONAL INSTITUTE OF TECHNOLOGY TIRUCHIRAPPALLI - 620 015, TAMIL NADU, INDIA

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## **LETTER OF AUTHORIZATION / (For Passed out Students only)**

То

Dean (Academic) National Institute of Technology, Tiruchirappalli - 620 015

Sub: Letter of authorization to collect documents –reg.	
Name	
Roll Number	
Department	
Specialization (for PG)	
Sir,	
I hereby authorize(Name of the person authorized) to act as my representative and collect following document(s) on my behalf from Office of the dean (academic), National Institute of technology, Tiruchirappalli.  1	
2	
3	
4	
	(Name of the person authorized) is my
(state your relationship with the person authorized). In this respect a copy of my identity proof is enclosed with the application for verification at your end.	
Signature of the person authorized	
Thanking you,	
Sincerely,	
(Name & Signature of the applicant)	

**Enclosures:** 

Identity proof of applicant a)