Name :		
Address:		
Date:		
Tel:		
То		
The Principal		
Nirmala Memorial Foundation	ı Jr. College of Com.&	Sci.
Kandivali (E)		
Mumbai 400 101		
Sub: Applica	ation for Duplicate I	Result Card
Respected Sir/Madam,		
I, the undersigned		
request you to kindly issue a		
The details of the requiremen	nt are as follows.	
Examination	Month & Year	Div & Roll No.
FYJC Commerce / Science		
Thanking You,		
Yours Truly,		
,,		
Signature of the student		