**Form No:PG/PhD/016**

 **भारतीय सूचना प्रौद्योगिकी अभिकल्पना एवं विनिर्माण संस्थान,कर्नूल**

 **INDIAN INSTITUTE OF INFORMATION TECHNOLOGY DESIGN AND MANUFACTURING, KURNOOL.**

(An Autonomous Institute under Ministry of Education, Govt. of India)

Jagannathagattu, Dinnedevarapadu, Kurnool-518007, Andhra Pradesh, INDIA

**E-mail:** academics@iiitk.ac.in **Phone No:** 08518-289111

LETTER OF AUTHORITY

**To**

**Associate Dean**

**(Academics, R & D)**

**IIITDM Kurnool**

**Sub.: Authority Letter to collect documents –regarding**

**Sir,**

*I \_\_\_\_\_\_\_\_\_\_\_\_\_(Name of the student) with \_\_\_\_\_\_\_\_\_\_\_\_(Roll No.) hereby authorize\_\_\_\_\_\_\_\_\_\_ (Name of the person authorized) (whose signature are attested below) to act as my representative and collect following document(s) on my behalf from Academic Section, IIITDM Kurnool.*

*i) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*ii) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*iii) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Further, to state Mr/Ms.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name of the person authorized) is my \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(state your relationship with the person authorized). In this respect a copy of my identity proof and attested identity proof Mr/Ms.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name of the person authorized) is enclosed with the application for verification at your end.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of the person authorized

Thanking you,

 Sincerely,

{Name & Signature of the applicant}

Enclosures:

a) Identity proof of {Name of the Student}

b) Identity proof of {Name of the person authorized}