Authorization Letter

From

Date:

Name :
Enrolment No. :
Branch :
Postal Address :

To:

The Dean (A/A),
NIT Manipur,
Imphal, Manipur

Dear Sir,

I hereby authorize _____ residing at _____ to complete all formalities and collect my _____ on my behalf.

NIT Manipur is no way responsible for any loss of the said documents after it is being handed over to the authorized representative.

Thanking you,

(Name & Signature of the Student)

(Name and Signature of the authorized representative)