



**SRI SATHYA SAI INSTITUTE OF HIGHER LEARNING**  
(Deemed to be University)

**APPLICATION FOR REGISTRATION OF  
STUDENT NAME CHANGE IN UNIVERSITY RECORDS**

(Application **must be** forwarded by the Director of Campus)

Existing Name:	
Father's Name:	
Registration Number:	
Landline Number:	
Mobile Number:	
Active Email ID:	
Correspondence Address:	
Permanent Address:	
<b>Changed Name as per the Gazette notification:</b> <i>(Photocopy of the Gazette Notification <b>must be enclosed</b>)</i>	
Enclosed IPO of `20 for Registration fee: <i>(IPO – crossed A/c Payee only)</i>	<b>IPO No:</b> <b>Date:</b>
<b>IPO is to be drawn in favour of: <i>Controller of Examinations, Sri Sathya Sai Institute of Higher Learning, Prasanthi Nilayam</i></b>	

Location & Date \_\_\_\_\_ Candidate Signature \_\_\_\_\_  
*Forwarded to the Controller of Examinations*

Date \_\_\_\_\_ Director of Campus Signature \_\_\_\_\_

*For official use only: The changed name has been noted in the relevant records of the Examinations Office, SSSIHL.*