

Reconsideration form

(Not to be submitted by the new applicants)

To,

I/C Director,
Academic Staff College,
Sant Gadge Baba Amravati University,
Amravati.

Sub : Reconsideration of my Application for Orientation Programme/Refresher Course.
Sir,

I had submitted my Application for **Orientation Programme/Refresher Course** in the subject _____ which was planned to be organized from _____ to _____. However I was not selected for the same program. I request you to kindly reconsider my said application for the Orientation Programme/ Refresher Course schedule to be held from _____ to _____. My Total teaching experience from the date of first appointment is _____ yrs _____ months.

Date:

Signature of Applicant _____

Place:

Name of Applicant _____

ENDORSMENT BY AUTHORITY

Certified that the information given by _____ is correct as per the record of this Institution and he/she, if granted admission, will be relieved to attend the Orientation Programme/Refresher Course.

Date:

Signature of Registrar/ Principal

Place:

Seal of University/College

(Name _____)

