Sriram Institute of Marine Studies

Approved by the **DG Shipping, Ministry of Shipping, Govt. of India.**

Affiliated to **Indian Maritime University Chennai, Certified ISO 9001:2015 By Indian Register of Shipping {IRS} MTI Unique id : 101005**

**No Dues certificate to be submitted by a student – Pre Sea Courses**

**Ref No : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**This is to state that I (Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Roll No:\_\_\_\_\_\_**

**Course\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Class \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Course attended in this institute from \_\_\_\_\_\_\_\_\_\_\_\_ To\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**

**I hereby state that I have attended the above course as per the above information in Sriram Institute of Marine Studies new Delhi. I state that I have received my following documents as mentioned below:**

|  |  |  |  |
| --- | --- | --- | --- |
| **SNo** | **Description** | **Certificate No** | **Remarks**  |
| **(a)** | **Passport** |  |  |
| **(b)** | **10th mark Sheet** |  |  |
| **©** | **12th Mark sheet** |  |  |
| **(d)** | **Admit card for final examination** |  |  |

**This is also to confirmed that have completed \_**

|  |  |  |  |
| --- | --- | --- | --- |
| **(a)** | **INDoS No** |  |  |
| **(b)** | **Basic safety training course** | **PST,PSSR, EFA FPFF** |  |
| **©** | **STSDSD Course** |  |  |
| **(d)** | **CDC application:** | **Date:**  | **App No:\_\_\_\_\_\_\_\_\_\_** |

**The certificate of Pre Sea course for GP Rating and Board of Examination certificate shall be received on successful of All India Exit Examination only.**

**I hereby state that I have no owes or dues towards the institute, its offices and the staff. I shall not claim or file any suits against the institute after completion of course:**

**Submitted to the course instructor Sh \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **II**

**Received by sh \_\_\_\_\_\_\_\_\_\_\_\_\_ on (date) \_\_\_\_\_\_\_\_\_\_\_\_\_ and submitted to HOI/ED for records.**