

**APPLICATION FOR EQUIVALENCE CERTIFICATE**  
**(Other Board/University Equivalence)**

To,  
The Secretary,  
Maharashtra State  
Board of Technical Education,  
49, Kherwadi, Bandra (East)  
Mumbai – 400051

**Sub: To issue the Equivalence Certificate**

Sir,

**(To be filled by the Student)**

I Undersigned kindly request you to issue me the Equivalence Certificate.

Name of the Student: \_\_\_\_\_

Address of Student: \_\_\_\_\_

\_\_\_\_\_ Pin code: \_\_\_\_\_ Phone No. \_\_\_\_\_

Name of Course: \_\_\_\_\_

Mode of Learning: Regular / Distance / Correspondence / Part-time :

Duration of Course : \_\_\_\_\_

Name of the Polytechnic / Institute: \_\_\_\_\_

Type of Institute: Government / Private (Un-aided) / Private (aided)

Status of Institute : Affiliated to Board or University / Autonomous

Name of the Board / University : \_\_\_\_\_

Year of Passing: \_\_\_\_\_

Status of Board / University: Government / Private: \_\_\_\_\_

**Documents required for Verification and Record**

1. Attested Xerox copy of Mark List of all Semester / Years Diploma in Engg. / Pharmacy.
2. Attested Xerox copy of College Leaving Certificate (Last Attended)
3. Attested Xerox copy of Provisional / Final Board Certificate / University Certificate.
4. Migration Certificate of Concerned State Board of Technical Education.

**Important Note:** The candidate may be asked to produce the original Documents for verification, if deemed it necessary. For more information about Equivalence, please refer to “Procedure for Equivalence (Other Board)” on website [www.msbt.org.in](http://www.msbt.org.in)

Yours faithfully,

Signature:

Name:

**For Office Use Only**

To Account Office

**R-010** Kindly accept the Amount of **Rs. 500/-** for the Equivalence Certificate

Head Clerk / Superintendent

The above Amount is accepted as per the Receipt No. \_\_\_\_\_

Date:

Cashier / Accountant  
Signature