

Date:

To

1. Gravity Integrates Private Limited
Besides Kailash Kanta Clinic, Shiv Mandir Lane, Ward NO 28,
Sec-1, Avanti vihar, Raipur-492006, Chattisgarh

2. TO ALL TO WHOM THESE PRESENTS SHALL COME

Sub: Appointment and Authorization to Gravity Integrates Private Limited to act as a lawful attorney for procuring of academic qualifications from (full name of the university)

I _____, Son/Daughter of Mr. _____, residing at _____.

WHEREAS I have applied for _____ (Permanent Resident/Work/Study Visa or other, mention the purpose) and in connection therewith, have to arrange (state the document like transcript, duplicate mark sheet, duplicate/original degree certificate, mode of instructions etc) of my academic qualifications (which all qualifications) from _____ (Name of the university).

AND WHEREAS I am unable to visit the said University and complete the necessary application and other formalities/documentation in this regard.

I, therefore appoint and authorize Gravity Integrates Private Limited, and its employees, directors, shareholders, associates partners and all the person, entities, organization and person acting on its behalf (collectively referred to as Gravity Representatives and Partners), to apply and procure transcripts(for other documents, pls specify _____) of my academic qualifications from the aforesaid university/Board/Institution.

I also authorize Gravity Representatives and Partners to do, execute the following acts deeds and things In my name, on my behalf and for me for obtaining the transcripts (for other documents, pls specify _____) of my academic qualifications, namely:

- 1) To make/submit the application form and represent me before the said university from time to time
- 2) To sign on my behalf, the necessary forms, applications, documents and other writings as may require from time to time;
- 3) To pay necessary fees, charges and other payments to the university as may be required for the aforesaid purpose;
- 4) To receive the transcripts(for other documents, pls specify _____) on my behalf from the said university; and

5) To do all other acts and things as may be required to be done for procuring the transcripts (for other documents, pls specify _____) of my academic qualification, as I would do if personally present.

I understand and agree that Gravity Representatives and Partners are relying on the timelines and information provided to it by the university/Board/Institution and its officials and is not responsible or liable for the delays, accuracy or completeness or conclusiveness of the information provided to it by the university/Board/Institution;

I hereby confirm that I will not hold Gravity Representatives and Partners, liable or claim in any manner whatsoever from Gravity Representatives and Partners for any direct or indirect loss/damage, whether financial or non-financial incurred by me directly or indirectly, due to or in connection with the application for procuring transcripts of my academic qualifications.

That I have read, understood and consent to these statements listed above also confirm that the information/details provided in terms of the candidate declaration/information in www.worldwidetranscripts.com are true and correct to the best of my knowledge. Nothing has been concealed.

I agree to provide all additional information/documents which may be required in connection with the requested services.

Name _____

Current Address

Signature

ID (PASSPORT COPY):