

**Application for ID Card**

Date:

To

The Director  
Sri Manakula Vinayagar Medical College and Hospital,  
Puducherry.

Respected Sir,

Sub: Request for issue new ID Card – Reg.

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I have lost my ID Card, so I request you to issue me new ID Card.

My details are as follows.

Name: .....

Course : ..... Year: ..... Semester: .....

Receipt No: ..... Amount paid: .....

Thanking you,

Yours Sincerely,

Name & Signature  
of student

Director