SRI VENKATESHWARA UNIVERSITY
PAKYONG, SIKKIM, INDIA

(Established by the Government of Sikkim & Recognised by the UGC under Section 2(f) of the UGC Act,1956.)

APPLICATION FORM FOR ISSUANCE OF ACADEMIC TRANSCRIPT

PASTE A DULY SELF-ATTESTED COLOURED PHOTOGRAPH

Name of Candidate: _____

Father's/Mother's Name: _____

Registration/Enrolment No.: _____

Course Name: _____

School : _____

Session: _____ **Mobile:** _____

Email: _____ **DOB:** _____

Correspondence Address: _____

_____ **Pin Code:** _____

Certificate Applied For

Sr. No.	Certificate Name

Fee Payment Details

Total Exam Fee Paid (₹): _____ Receipt / DD/ Transaction No.: _____

Date: _____

Declaration

I hereby declare that the information furnished above is true and correct to the best of my knowledge and belief. I further certify that the documents submitted are true copies of the original records. In the event of any information being found false or any document being invalid or forged, I understand that my admission/degree shall be liable to cancellation, fees forfeited, and appropriate legal action initiated against me.

Student Signature: _____ Date: _____

Office of The Registrar (Office Use)

Checked & Approved: _____ Date: _____