

Payment Receipt No
Amount Rs.
Date:
Date:

ST.TERESA'S COLLEGE (AUTONOMOUS) ERNAKULAM

Affiliated to Mahatma Gandhi University, Kottayam

APPLICATION FOR DUPLICATE MARK LIST

Name of the Candidate	
Register Number	
Name of the Programme	
Year of Admission	

1. Details of Duplicate Mark List to be required

Reg.No	Month & Year of Exam	Regular/Suppl ementary	Whether passed or failed	If passed total mark obtained

2. Details of Affidavit

Name and Address of the Notary	Date of affidavit

Ad	ddress to which the Duplicate Mark List is to be sent:
	Pin Code
	Contact Ph.No
Shou	uld provide Self –addressed and duty stamped A4 cloth lined cover along with the application.
	UNDERTAKING
ma	The particulars given above are true and correct. I hereby undertake that if the original rk list is recovered, I will inform the fact to the University and surrender the same.
Pla	ce:
Dat	te: Signature of the Applicant
<u>Enc</u>	losures required
1. /	Affidavit
2. C	Copy of Student ID Card.
3. C	Copy of the lost mark list (if available).
Inst	<u>tructions</u>
1.	Affidavit should be in stamp paper worth of Rs.100/- from the Notary.
	<u>FEES</u>
	Rs.500/- (Rupees Five Hundred Only) per copy.