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PANJAB UNIVERSITY, CHANDIGARH						
APPLICATION FOR ISSUANCE OF TRANSCRIPTS/VERIFICATION OF QUALIFICATION/ ATTESTATION OF PHOTO COPIES OF CERTIFICATES/ SYLLABI ETC. (TO BE FILLED IN STRICTLY BY THE CANDIDATE ONLY).						
(SEE INSTRUCTION OVERLEAF)						
<div style="text-align: right;"> B. Fee paid Rs. _____ Bank Draft/University _____ Receipt No. _____ (Name of the Bank) _____ Drawn on _____ Date _____ </div>						
A. APPLICANT'S NAME (PLEASE USE IN CAPITAL LETTERS ONLY)						
<div style="border: 1px solid black; height: 1.2em; width: 100%;"></div>						
B. FATHER'S NAME						
<div style="border: 1px solid black; height: 1.2em; width: 100%;"></div>						
C. MOTHER'S NAME						
<div style="border: 1px solid black; height: 1.2em; width: 100%;"></div>						
Regd. No. _____						
C. Nature of Document required (Please tick the relevant item) : Transcripts/ Verification of Qualifications/ Attestation of Photo copies of certificates/ Attestation of Photo copies of syllabi etc. No. of the copies for Transcripts/ Photocopies of Certificate/ Syllabi required : _____						
D. Reason(s) for applying						
E. Details of Examinations passed/Syllabi required :						
Sr.No.	Name of Examination	Roll No.	Session/year	Marks Obtd.	Max. Marks	Name of the College/Deptt./State
1						
2						
3						
4						
5						
F. Name, Full Address & Phone No. (if any) of the applicant: <div style="display: flex; justify-content: space-between;"> Phone No. Office _____ Residence _____ </div> <div style="display: flex; justify-content: space-between;"> E-mail Address _____ _____ </div> <div style="text-align: right; padding-top: 5px;">(Full Signature of the candidate)</div>						
G. (For Office use only)						

Particulars checked and found correct.

Dealing Official/ Asstt./ A.S.O.

Superintendent

H. Names & Full address of the Institutions for dispatch of Transcripts/Verification of Qualifications/ Attested photo copies of certificates/Syllabi.	
1. _____ _____	3. _____ _____
2. _____ _____	4. _____ _____

