

**SRI KRISHNA ARTS AND SCIENCE COLLEGE
COIMBATORE - 641 008**

APPLICATION FOR ISSUE OF DUPLICATE CERTIFICATE

1. Duplicate of which Certificate* required :
2. Name of the Candidate :
3. Register Number :
4. Programme of study :
5. Branch :
6. Period of study :
7. (a) If applying for duplicate statement of
Marks fill in the month and year of exam.
for which mark statement was issued. :
- (b) If applying for duplicate consolidated
Statement of marks fill in the Month &
Year of last appearance in which qualified
for the degree :
8. Circumstances under which the certificate
Was lost / destroyed :
9. Whether the prescribed affidavit has been
enclosed with the application or FIR copy
to be enclosed :
10. Fees paid : ₹

Place:

Date:

SIGNATURE OF THE CANDIDATE

FOR OFFICE USE ONLY	
Certificate issued on	Prepared by:
Folio No.	Examine by:

CONTROLLER OF EXAMINATIONS

PRINCIPAL

* Write as Statement of Marks/Consolidated Statement of Marks
(For instruction see over leaf)

INSTRUCTIONS

1. Duplicate certificate will be issued only when it is lost or destroyed irrevocably.
2. Application duly filled-in along with an affidavit detailing the circumstances under which the original certificate was lost or destroyed.
3. The affidavit should be duly executed before the Notary Public.
4. Application shall be complete in every respect. Failure to furnish correct details may cause delay in the issue of the certificate. The application shall be filled in only by the candidate otherwise it will be rejected.
5. The fees should be paid through the college office.
6. Fees once paid shall neither be refunded nor adjusted against any other certificate under any circumstances.

AFFIDAVIT TO BE FILLED FOR ISSUE OF DUPLICATE CERTIFICATE

AFFIDAVIT OF Thiru / Selvi _____

1. I _____
son/daughter of _____ aged _____ years,
an old student /student of Sri Krishna Arts and Science College with Register
Number _____ and residing at _____
_____ do hereby solemnly and
sincerely state as follows.

2. My _____ statement of marks issued relating to the examinations
held during _____/ Consolidated statement of marks issued by the
college has irrevocably been lost / destroyed.

3. I fill this affidavit for the purpose of receiving duplicate certificate.

4. The duplicate certificate shall be returned to the college once my original
certificate(s) is/are recovered by chance.

5. The facts stated are true and correct to the best of my knowledge and if found false
by the college, I shall abide by the decision of the college.

Solemnly affirmed.

At (place) _____

Signature of the Candidate

(Before me)

This (date) _____ day of

The Signature affixed in my presence.

Place:

Date :

Notary Public

Address _____

Seal:

*delete which is not applicable.