Format for Duplicate Marks Sheet/Duplicate Passing Certificate

To

The Director
BVIMR, New Delhi

Sir,

Kindly consider my application for Duplicate marks sheet/Duplicate passing certificate.
My personal details are as follows: -

Enter Your Personal Detail:-

1. Student Name:-
2. Course:-
3. Batch: -
4. ERP ID: -
5. Permanent Registration Number (PRN): -
6. Current Mobile No: -
7. Current Email ID:-
8. Father's Name:-
9. Aadhar No
10. Home Address: -
11. Mention Semester for Duplicate Mark Sheet

Note: Instructions for student

Attach following Documents with this form/application

1. Attach Application for Duplicate Document (Application Copy Attached)
2. Attach Affidavit for Loss of Educational Documents (Affidavit Attached)
3. Attached Document of Witness (any one): Aadhar / PAN / Driving License / Passport / etc.
4. Attach Demand Draft (Fees mentioned below)
5. **DD in favour of "BVDU, Pune (Exam)", payable at Pune.**
6. Demand Draft No._____ Date: _____ Bank: _____ Branch_____ Amount_____

Note: -

1. Fees for Duplicate Mark Sheet is Rs. 300/- per semester and courier charges is Rs. 300/-
2. Fees for Duplicate Passing Certificate is Rs. 300/- and courier charges is Rs. 300/-
3. Processing time of application is 30 working days after receiving application by SSC.

For any other inquiry, you can write to the following E-mail id ssc.bvimr@bharatividyapeeth.edu

Signature of Student: _____

Name of student: _____

BHARATI VIDYAPEETH (DEEMED TO BE UNIVERSITY), PUNE

Examination Section

APPLICATION FOR DUPLICATE DOCUMENT

Name :_____

P.R.N. : _____

Address :_____

_____

_____

Mobile No. : _____

Email. : _____

Date : _____

To,
The Controller of Examinations
Bharati Vidyapeeth (Deemed to be University),
Pune- 411 030

Sub: Issue of Duplicate Document(s).

Respected Sir,

I hereby apply for the following Duplicate Document(s), which are lost by me. Necessary affidavit and other documents are enclosed herewith. I, request you to kindly issue me the same. Details of documents are as under:

Programme : _____, College/Institute: _____

Duplicate(s) required For: **Marksheet(s) / Passing Certificate / Degree Certificate / Others**

Marksheet(s) : _____

Passing Certificate for: _____

Degree Certificate: Date of Convocation: _____ Certificate No.: _____

Any Other _____

Thanking you,

Yours faithfully,

Signature of the Candidate

The Controller of Examinations (BVDU - Exam. Section) The applicant details are verified and there is **No Objection** to issue the duplicate document. **Stamp/Seal** **Principal/Director**	**The Finance Officer** (Account Section) Please Accept the fee of Rs. ._____ for duplicate documents. **Controller of Examinations**

Note : *Please enclose the affidavit for loss of educational document and photo copies of concern documents.*

AFFIDAVIT FOR LOSS OF EDUCATIONAL DOCUMENTS

I, ..., aged ..... years,

son/daughter of ....., residing at .....

....., do hereby solemnly affirm and declare as under:

1. That I am a citizen of ....., Aadhar / Passport no.: .....
2. That I have completed my programme ....
   from College/Institute..... ....
   located at ....in the year ..... with PRN : .....
3. That during my education, I was issued the related educational documents. But one of the document(s) ..... is misplaced.
4. That unfortunately, I have misplaced/lost the aforesaid document(s) under the following circumstances: (tick marked)
   i) due to shifting of my residence ☐
   ii) due to theft ☐
   iii) due to accidental misplacement ☐
   iv) due to lost while traveling ☐
   v) ..... ☐
5. That I have made all reasonable efforts to locate the said document(s), but have been unable to recover them.
6. That I require duplicates of the said educational document(s) for further education or service.
7. That I have not misused or handed over the original document(s) to any person or entity, and I undertake to return the original document(s) to the University authority if found at a later date.
8. That this affidavit is made in good faith and for the purpose of obtaining duplicate copies of my educational document(s).

Signature : ..... Name : .....

Date: ..... Place : .....

VERIFICATION / WITNESS

I, ..., the above named deponent, do hereby verify that the contents of this affidavit are true and correct to the best of my knowledge and belief, and nothing material has been concealed therefrom.

Signature : ..... Name : .....

Date: ..... Mobile No. : .....

Address : .....

Attached Document of Witness (any one): Aadhar / PAN / Driving License / Passport / etc.