

APPLICATION FOR TRANSCRIPT VERIFICATION

1. Name of Applicant :
(Full Name in Capital)
2. Full Address (Residence) :
3. Applicant Mobile No. (local) :
4. Institute Ref. No./ID No./App. No. :
5. Detail of Degree :
 - (a) Name of the Degree :
 - (b) Last year seat No. :
 - (c) Passing Month & Year :
 - (d) Convocation Date :
6. Mailing Address of Institute (Verification asked by the Institution) (જે સંસ્થાએ વેરીફિકેશન માંગેલ હોય તે સંસ્થાનું જ સરનામું) :
.....
.....
.....
.....
.....
.....
.....
.....
7. Detail of Fees :
Transcript Verification Receipt No. Date :

.....
Signature of Applicant

Enclosure :

- (1) Original sign Stamped Transcripts and **1 Xerox copy of Transcripts.**
- (2) Xerox of all Marksheets obtained form Gujarat University
- (3) Xerox of Photo I Card (Election Card, Adhar Card, Pan Card, Pass Port Etc.)