



GUJARAT AYURVED UNIVERSITY

Accredited Grade "A" by NAAC (CGPA 3.28)

Chanakya Bhavan, Jamnagar- 361 008

APPLICATION FORM FOR DUPLICATE COPY OF EDUCATIONAL CREDENTIAL (Form fill should be Block Letters only)

Name of the Applicant:		<input type="checkbox"/> Mark-sheet <input type="checkbox"/> Provisional Certificate <input type="checkbox"/> Internship Certificate
Residential Address:		
City (With Pin Code):		
Mobile Number:		
E-Mail ID:		
Date of Application:		

To,

The Controller of Examination

Gujarat Ayurved University, Jamnagar.

Sir,

I the undersigned request you to kindly issue me the Duplicate Copy of Educational Credential. My academic particulars are as follows:

Mode of Payment

: Cash : Demand Draft

DD No. : _____

Bank : _____

Date : _____

Name of Student	(In full and in CAPITAL Letters, as per Enrollment)												
Enrollment / PRN Number													
Name of College													
Name of the Examination	(As per Mark-sheet)												
Seat Number							Month & Year of Passing						
Result													
Total Marks obtained							Out of						
Purpose of Certification													

* If you need multiple mark sheet then fill up below details of particular exam.

Sr.No.	Exam	Year	Seat Number

I hereby declare that, I have read the rules related to issuance of the said certificate. I the undersigned hereby solemnly affirm that the details specified hereinabove submitted thereto in support of information filled in this form by me is/are accurate and as per the actual record(s) to the best of my knowledge.

Yours faithfully,

Signature of the Applicant

Instructions:

1. Please pay Rs. 1000/- fees [NON-REFUNDABLE] per document by cash to Accounts Section between 10:30 a.m. to 2:00 p.m. or by Demand Draft.
2. **Demand Draft on the name of "Registrar, Gujarat Ayurved University, Jamnagar"**
3. **Please submit this form along with the self-attested copy of the LAST Mark-sheet.**
4. **Incomplete application will not be entertained.**
5. **Please submit an Undertaking on a Non-judicial Stamp Paper of Rs. 50/- declaring the Loss of Document.**
6. The application should be made and signed by the candidate himself/herself. Application made by a person other than the candidate will not be entertained.
7. You will be contacted on the mobile, as soon as the Certificate is ready.
8. This certification will be issued to the candidate by Register A.D. or "In Person" only on production of the Identity Card. In case the candidate is unable to present in person, the written authority from the applicant should be produced along with the copy of ID Proof with signature of the student as well as Valid Photo Identity-card of the authorized person collecting the certificate on Student's behalf.

FORMAT OF AFFIDAVIT TO BE EXECUTED ON NON-JUDICIAL STAMP PAPER OF THE VALUE OF
RS. 50/- BEFORE A FIRST CLASS MEGISTRATE/NOTARY FOR ISSUE OF DUPLICATE CERTIFICATE

1) I _____ Son/Daughter of _____
aged _____ years, an alumni / student of _____ (Degree Name)
of _____ (College Name)
affiliated to Gujarat Ayurved University, Jamnagar with Enrolment / Examination
number _____ and residing at _____

_____ (your residential address)

do hereby solemnly and sincerely state as follows.

- 2) My (i) * Marksheet / Provisional Certificate / Internship Certificate of Year _____
Examinations held during _____
(ii) * Degree/Diploma certificate issued at the Convocation held on is/are lost.
- 3) I file this affidavit for the purpose of receiving duplicate certificate.
- 4) I will return immediately the duplicate certificate(s) to the University 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 University, I
shall abide by the decision of the University.
- 6) I also undertake that if my original Diploma/Degree/Certificate which has been lost, if put to any unfair
use by the person who may lay hands on it, I shall stand for the damages which may accrue from such
use.

Place :

Date :

Solemnly affirmed

at..... (place)

thisday of 20.....

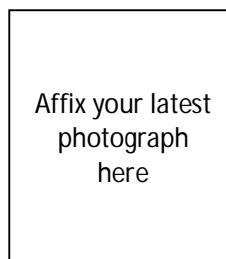
and his / her signature is affixed in my presence.

Signature of Deponent Address:

Office seal:

* delete which is not applicable and add in case of Multiple Marksheets.

Note: Photo Identity Proof duly attested should be attached with the Affidavit.



Signature of the Candidate