KALINGA UNIVERSITY

Established under Chhattisgarh Private Universities (Establishment and Operation) Act, 2005

Kotni, Near Mantralaya, Naya Raipur, Chhattisgarh, INDIA – 492101
Mob: 93030 97043, Email – registrar@kalingauniversity.ac.in

APPLICATION FORM FOR ISSUE OF ATTENDANCE CERTIFICATE

Instructions: The form is to be filled by Student in English CAPITAL letter and in blue/black ink. Enclose, duly attested photocopy of all documents which should be self-attested by the Student.

1. Name of Applicant……..
2. Father's Name…….
3. Mother's Name……
4. Enrollment Number……
5. Date of Birth……..
6. Roll No. (Last year / Final year Exam)

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Affix box size photograph of the Student

7. Name of Course Completed
8. Total Duration of the Course (Yrs.)
9. Duration of Course

   from……....To…….....

   .....
10. Under Lateral Entry / Credit Transfer Scheme: Yes……..No……
11. Postal Address of Student

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    Pin Code …… STD Code……Tel……Mobile No……
12. Fees for Issue of Attendance Certificate Rs. 1750/-

    (**DD to be in favour of Kalinga university payable at Chhattisgarh Raipur) / Cash Payment……**
13. Reason for Requesting Attendance Certificate:

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Applicant should write all information mentioned above correctly and clearly in blue/black ink only. If any information is written wrongly then the university is not responsible for the loss of information or any document or non-issuance of Attendance Certificate.

Declaration by the Student

I (Name) hereby declare that the information furnished By me is correct to the best of my knowledge and belief. I also certify that the copies of document duly signed and enclosed by me are true and corrected copies of the originals. In case of any information given by me is found to be false or any certificate enclosed is found invalid or forged, I understand that my admission will be cancelled and all fees paid will be forfeited besides being open to other legal action.

(No of Enclosures.....)

Full Signature of Student