

OFFICE OF THE CONTROLLER OF EXAMINATIONS

Ref No: SUN/CoE/DS/Circular/351 Date:- 08-12-2020

Circular

Sub: Issuance of Degree Certificate to the students passed out during April/May 2019

With reference to the above subject, Degree Certificate will be issued to the students who have completed their degree during April/May 2019 examinations.

The prerequisites may please be noted as given under:

- 1. Students can use the application form given in the Annexure A.
- 2. Fill the required data and sign on the application form.
- 3. Scan the application form and send it to the through email to certificate.coe@sandipuniversity.edu.in
- 4. Attach all the grade sheets required for the award of degree.



Controller of Examinations

To:

All Deans/Heads/CoE coordinators

Copy to:

1. PS to Vice-Chancellor

2. The Registrar

3. The Finance officer

4. Sandip University Group



Mahiravani, Trimbak Road, Nashik – 422 213

Website: http://www.sandipuniversity.edu.in Email:info@sandipuniversity.edu.in

Ph: (02594) 222 541 Fax: (02594) 222 555

Application for obtaining the Degree Certificate

(Fill the information carefully in the application form)				latest passport size colour photograph
PRN No.		Enrollm Year	ent	
		1001		Don't staple
1. Name o	of the candidate in full (in Block Letters as v	was written in the SSC/HSC/C	BSE Certificate)
Student's	s Name (in English)			
Father's	Name (in English)			
2. a) Name	e of the School:		b) Name of the Branch:	
c) Name	e of the programme:		_ d) Year of passing:	
3. If apply	ing for M.Tech./Ph.D.	degree, furnish belo	w the title of Dissertation/Proje	ect/Thesis:
Name	of the Supervisor/s:			
	•		furnish full postal addres to be dispatched (please write	•
Mailing address with PIN Code (for sending the certificate)		Permanent address with PIN Code		
Name				
Addre	ess:			
PIN (PIN Code:	
Mobil	e No.:		E-mail:	
5. Present	Occupation & Positi	ion- a) Occupatio	n: b) Position	1:
c) Offic	ce Address:			
	L			

Signature of the candidate

Affix your

Enclosure: Consolidated Mark sheet (Self Attested)

Place:

Date:

For Account office use only: Name of Student: PRN: Programme Name: Application Fees: Accountant Sign. and Seal