



DR. C. V. RAMAN UNIVERSITY

Kargi Road Kota, Bilaspur(C.G.)

Application form for Degree Certificate

Student Name (Hindi) : -----

Student Name (English) : -----

Name of class : -----

Session :----- to -----

Division :-----

Subject Indicated in the Mark Sheet : -----

Roll NO. : -----

Enrollment no. : -----

Name of Exam Center : -----

Students Postal Address : -----

Tel.No./Mob. -----

I agree to receive my Degree/ Diploma Certificate. The Degree/Diploma fees of

Rs. 350.00 (Three Hundred Fifty only) Challan No.----- Date -----
is enclosed here with this application form and Declaration.

Place-----

Date : -----

Applicant Signature

Note : Send filled and signed application form along D.D.and cash to
Dr. C.V. Raman University, Kota, Bilaspur (C.G.)