

Application for issue of PROVISIONAL PASS CERTIFICATE /CONSOLIDATED MARK CARD/DUPLICATE MARK CARD (fill the details which are applicable)

					Reg. No.:										
NAME (in Capital letters)						•	•								
Institution Name															
mstitution Name															
Course name															
Branch/ Specialization					M	lontl									
Tel/Mobile No.:					e-Mail:										
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		-													
☐ PROVISIONAL PASS CERTIFICATE		į	Month & Year of passing : Internship Completion date:												
		(enclose copy of the certificate,													
		Applicable for MBBS, BDS & Allied Health Science courses)													
☐ CONSOLIDATED MARK CARD		Year/Sem.:													
		number of original mark cards enclosed.													
		(Enclose all original mark cards for issue of consolidated mark cards)													
		(Enclose an original mark cards for issue of consolidated fliat & Calds)													
DUPLICATE MARK CARD		Encl	losed:	number of damaged original mark cards											
					Affidavit and FIR copy										
Note: i. Enclose damag	ged/mutilated origin	al marl	k card(s)	for rep	olacement wit	h dup	olicat	e ma	ırk ca	rd(s)).				
	place/loss of mark ca			n affida	vit (refer over	leaf t	for fo	rmat	t of t	he af	fidavi	t) and	сору		
or police comp	plaint (FIR) for duplic														
			Details	of fees	s paid					1					
DD/Challan/ Receipt No. and date					Bank Nam	e				Amount (₹)					
Place:															
Date:				Signature of the Candidate											
			For of												
	V	'erifie	ed and	Reco	mmended										
 It is certified 	that the candidate	e has c	cleared	all du	es.										
Verifier Name:															
Signature:							_			_	of th				
			ŀ	<u>lea</u> d	of t	Head of the Institution									

FORMAT OF THE AFFIDAVIT (on ₹20/- Non-Judicial Stamp Paper)

Before the Registrar-Evaluation, Manipal Academy of Higher Education (Deemed to be University) Manipal, Udupi District, Karnataka, India
(Name of the Student),Deponent
AFFIDAVIT
I,son/daughter of
agedsolemnly affirm and state as follows:
1. I say that I have misplaced the originals of the following certificates issued by the Manipal Academy of Higher Education (Deemed to be University), Manipal
a) Registration Number b) Particulars of the Certificate Lost:
2. I say that in spite of diligent search I am unable to trace the originals of the aforesaid certificates and hence they are taken as lost. If traced, I will produce them before the Manipal Academy of Higher Education (Deemed to be University), Manipal.
3. I say that I have not misused the same and I shall not misuse the same if recovered.
4. I say that for the purpose of I need the certified duplicates of the said certificates.
5. It is therefore necessary that on the strength of this affidavit certified duplicates are issued to me by Manipal Academy of Higher Education (Deemed to be University), Manipal at my cost.
6. All this is true.
DEPONENT
Solemnly affirmed and signed before me on this day of
dt