

MANONMANIAM SUNDARANAR UNIVERSITY, TIRUNELVELI-12

Application for Consolidated Mark Statement

Course	Major	Register No.	College Code

1. Name of the Candidate with initials in English (in Block Letters) :-

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

2. Sex:

M		F		T	
----------	--	----------	--	----------	--

3. Name of the College:

4. Month and Year of Passing:

--	--	--	--	--	--	--	--

5. Address for Communication:

Pin code

6. Mobile No.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

7. Email ID: _____

8. Payments Details:

Amount	Challan/DD No	Place of the Bank	Name of the Bank	Date

Enclosure: Fourth/ Sixth semester Mark Statement

Date:

Signature of the Candidate

Office Seal & Date

Signature of the Principal