

## **SNDT Women's University**

## Pariksha Bhavan

Sir Vithaldas Vidyavihar, Juhu Road, Santacruz (W), Mumbai – 400 049.

TEL: 022-26608462/93 EXTN.: 395, 022-26615168 EXTN.:103, 104. & 022-26612877 (Direct)

Website: www.sndt.ac.in, Email: sndtmcdc@gmail.com & mcdc@exam.sndt.ac.in

The Controller of Examinations SNDT Women's University, Pariksha Bhavan, Juhu Road, Santacruz (W), Mumbai - 400 049.

Amount Paid Rs.:					
Receipt No.:					
Date ://					

## **APPLICATION FORM FOR PASSING CERTIFICATE (Fee Rs - 150/-)**

To be filled by Student only:

A} Personal Details 1] Name of Student at the	:	•	•		
time of Examination	(Surname)	(First Name)	(Middle Name)	(Mother's Name)	
2] Complete Postal Address	:				
	Pin				
3] Contact Details	: MobTel.No				
B} Academic Details 1] Name of the Examination	:				
2] Seat Number	: Month & Passing Year:				
3] Institute Code	: Centre Name: Centre Code:				
4] Mode of study	: As Regular Stud	dent	By Distance Edu	cation	
5] Name of the College/ Department	:				
bepartment	Telephone No				
6] Mode of Payment	: By Cash By	D.D. D.D.No	o Bank _	Date	
Date ://				Signature of the Student	
NOTE:					
<ol> <li>Fee for passing</li> </ol>					
<ol><li>A photocopy o</li></ol>	•				
•	•		d Draft should be in ai." Payable at Mur		
				to 02:30pm (For Payment) to 02:30pm (For Submission)	