



Director of Distance Education  
Janardan Rai Nagar  
**Rajasthan Vidyapeeth (Deemed) University**  
Pratap Nagar, Udaipur-313001, Rajasthan  
www.rvduniversity.com

To,  
The Controller of Examinations, J.R.N Rajasthan Vidyapeeth (Deemed) University, Udaipur (Rajasthan).

**Sub : Issue of CONSOLIDATED MARKSHEET**

**1. Applicant's Address**

Name	:	
Father's Name	:	
Mother's Name	:	
Address	:	
Pincode	:	

**2. Study Center's Address**

Center Code	:	DDE/RVU/SA/ 079			
Name	:	S.S.K College			
Address	:	City Centre Plaza, Second Floor No.7, Anna Salai,			
City	:	Chennai	State	:	Tamilnadu
Pincode	:	600 002.			

**3. Tel No.**

(With STD Code: )

**4. Email :**

**5. Name of the Examination :**

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Diploma

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B.Tech

☐

M.Tech

**6. Stream :**

**7. Year of**

Passing :

**8. Roll Number :**

**9. Enrollment No. :**

**10. Request for the issue :-**

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Consolidated  
Marksheet

**11. Academic Details (Enclose Xerox and attested copies of the Marks card of all semesters) :**

Course	Stream	Semester	Month & year of Passing	Semester Total	Semester Grade

**12. Reason (Indicate briefly the reason or obtaining above certificate) :**

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**13. Details of fees paid :**

DD/Challan No.	DD Date	DD Amount(Rs.)	Bank Name	(DD should be payable at Udaipur)

**14. Declaration By the Applicant :**

- I certify that I have read and understood all the provisions indicated in the prospectus and the Circulars published in the website **www.rvduniversity.com** from time to time.
- I certify that after being fully satisfied with this course I had decided to get enrolled out of my own free will and desire.
- I further certify that same had been without any inducement and misrepresentation either from the said University or any other person concerned.
- I shall abide by this undertaking and shall not hold anybody responsible for the same in any manner after the completion of the course.
- I hereby certify that all the particulars stated in this application are true to the best of my knowledge & belief. In the event of suppression or distortion of any fact made in my application only I will be held responsible.
- I understand that FEES once paid will NOT be refunded.

Paste one recent passport size  
Photograph preferably Black &  
White duly signed by the Co-  
ordinator at the Study Centre

**Specimen Signature of the Candidate**

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**For Office Use**

Eligibility verified and found correct

YES / NO

Fees Received

Certificates verified

Despatched on  
References

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**Signature of Controller of Examination**

Date :

**INSTRUCTIONS****Following documents must be forwarded along with the application :**

- Certified true copy of 10th or equivalent in case of Diploma students and 10+2 or equivalent in case of B.Tech students and Degree pass certificate of M.Tech students. (Duly attested)
- Copy of Provisional pass certificate if already obtained from the University.
- Xerox copy of the Marks Sheet of all semesters. (Duly attested)

**Note : Along with all relevant documents & DD the application form should be submitted to the study center only.**  
DD should be in the Name of **J.R.N Rajasthan Vidyapeeth (Deemed) University, Payable at Udaipur.**

**FEES**

S. No.	Description	New Fees
1.	Consolidated Marksheet	Rs. 100/-
2.	Provisional Certificate	Rs. 100/-
3.	Original Degree Certificate	Rs. 200/-
4.	Duplicate Degree Certificate	Rs. 500/-
5.	Duplicate Mark Sheet	Rs. 200/-
6.	Migration Certificate	Rs. 150/-

**FORMAT OF THE AFFIDAVIT (on Rs. 15/- Judicial Stamp Paper)**

Before the Controller of Examination, J.R.N. Rajasthan Vidyapeeth (Deemed) University, Udaipur.

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(Name of the Student) 

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deponentI, 

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, son/ daughter/wife of 

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aged 

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 residing at 

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solemnly affirm and state as follows :

- I say that I have lost the originals of the following certificates issued by the J.R.N. Rajasthan Vidyapeeth (Deemed) University, Udaipur. I hereby attach the copy of FIR lodged with the police/ (other forms of complaints lodged if any)

**Reg No.****Particulars of the certificates lost**

- 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 University.
- I say that I have not misused the same and I shall not misuse the same if recovered.
- I say that for the purpose of 

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I need the certified duplicates of the said certificates.
- It is therefore necessary that on the strength of this affidavit certified duplicates are issued to me by the University.
- All this is true.

**Signature of the DEPONENT**Solemnly affirmed and signed before me on this day of 

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Dt 

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**NOTARY PUBLIC**

**UNDERTAKING FORM**  
**(By the Student )**

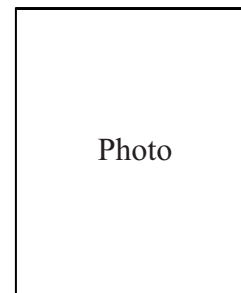
To,

**The Director**

Directorate of Distance Education

J.R.N. Rajasthan Vidyapeeth (Deemed) University

Sir / Madam,



This is to declare that, I \_\_\_\_\_ Son/ Daughter of \_\_\_\_\_ have taken admission in \_\_\_\_\_ Course in (Winter / Summer) semester. 200 \_\_\_\_ in \_\_\_\_\_ Stream under Directorate of Distance Education. J.R.N. Rajasthan Vidyapeeth (Deemed) University, Udaipur (Raj). And I assure that all the original documents enclosed related to my qualification regarding the admission are corrected and authentic.

In the event of suppression or distortion of any fact like educational qualification, nationality and study period etc. made in my application form. I understand that my admission is liable to be cancelled.

I am eligible for the examination as per the rules and regulations of the university. I shall be responsible for the consequences if the information filled by me is found incorrect. If I am found ineligible for admission to a class. At any stage, my application will be rejected even if my result has been finally declared.

Place : \_\_\_\_\_

**Signature of the Candidate**

Date: \_\_\_\_\_

Enrollment No. \_\_\_\_\_

**Undertaking by the Study Centers**

This is to certified that Mr./Ms./Mrs. \_\_\_\_\_

Son / Daughter / Wife \_\_\_\_\_ Is a students registered from our Study Center. The photo pasted on this form depicts his/her current appearance correctly. I have personally checked all the documents enclosed herewith. I attest that all the entries are correct. I, as well as the candidate, Know that if his / her result is finally not declared due to ineligibility. I and the students shall bear full responsibility for rejection and not the University.

Place : \_\_\_\_\_

**Signature of the Center Head**

Date : \_\_\_\_\_

Study Centers Code: **DDE / RVU / SA / 079**

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