

APPLICATION FOR DUPLICATE DMC/DEGREE

(Fill in Capital letters only)

1. Name:
 2. Father's Name:
 3. Mother's Name:
 4. University Roll No.:Registration No.....
 5. Details of Examination of which DMC is sought:
 Program: Semester:
 6. FIR Copy attached (If lost/theft) (Yes/ No).....
 7. Damaged attached Copy (If Damaged) (Yes/No)
 8. Affidavit (Yes/No)
 9. Payment Detail:
 Receipt No/Draft No..... Dated
- (Draft to be made in favour of Registrar, Desh Bhagat University)
- Date: Student Signature:

NOC (From Accounts Department):
 Date: Signature (with seal).....

Recommendation of Director:

 Date: (Signature with Seal):

Remarks..... **Controller of Examination**

FOR OFFICE USE ONLY (Document/DMC Section)
 Discrepancy in Application (if any):
 Recommended/ Not Recommended:

 Reasons for Rejection:

 Action Taken:

FOR OFFICE USE ONLY (Registration Section)
 Discrepancy in Application (if any):
 Recommended/ Not Recommended:

 Reasons for Rejection:

 Action Taken:

Dealing Clerk
 Date:

Dealing Clerk
 Date: