

UNIVERSITY OF CALICUT

APPLICATION FOR EQUIVALENCY / RECOGNITION CERTIFICATE

1.	Name of the Candidate (in block letters)	
2.	Address for Communication (in block letters) (with Telephone / Mobile No.)	
3.	Name of the Course / Examination passed (Enclose copy of the Certificate & Mark list of SSLC, PDC/+2, Degree, PG, M.Phil etc.)	
	a) Duration of the Course Years (From to)
	b) Register No. of the Course	
4.	Mode of Study	Regular College/Correspondence/Private/External
	a) Name of the College / Institution, where attended for the Course	
	b) Number & Date of Transfer Certificate (Enclose copy of the TC/Course Certificate)	
5.	Name of the University / Board / Institution for the Course attended	
6.	Amount of Fee remitted	Rs.
	a) Chalan Number & Date	
	b) Name of the Bank / Treasury	
7.	Purpose of the Certificate	For Employment / Higher Studies

DECLARATION / UNDERTAKING

I,, do hereby declare that the entries made above are correct to the best of my knowledge. I also undertake that in case any of the details given above are later found to be false or misleading, I alone will be responsible for all the hardships in this regard.

Place :

Date :

Name and Signature of the Candidate

FOR OFFICE USE ONLY

Number of the Certificate : EQ/

Folio Number & Date of Issue :

ASSISTANT

SECTION OFFICER

ASSISTANT REGISTRAR

DEPUTY REGISTRAR