



श्री चन्द्रशेखरेन्द्र सरस्वती विश्वमहाविद्यालयः  
**SRI CHANDRASEKHARENDRASARASWATHI VISWA MAHAVIDYALAYA**

[University Established Under Section 3 of the UGC Act, 1956]

Enathur, Kanchipuram - 631 561

Tel: (91) 44-27264293, 27264308, 27264301 Fax: (91) 44-27264285 Grams : "UNIKANCHI"

**APPLICATION FOR THE ANNUAL CONVOCATION**

1. a) Name in English (In Block Letters As per Mark Sheet)

(Xerox Copy of the Mark Sheet Should be enclosed )


b) Name in Sanskrit / Mother Tongue

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2. Address for Communication with Phone No (In Block Letters)

_____
_____
_____
Phone No : _____
PIN : _____ STATE : _____

PHOTO
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3. Expansion of Initial :

4. Sex : Male / Female

5. Register Number :

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6. Course and Branch :

7. Class : FIRST CLASS WITH DISTINCTION / FIRST / SEOND / THIRD

8. Month & Year of Completion :

9. Year of Admission :

10. Name of the Centre :

11. Mode of Receiving the Degree : IN PERSON / IN ABSENTIA  
[During Convocation] [Through Post]  
( Rs. 1000/- ) ( Rs. 1250/- )

12. Particulars of Remittance : Amount : : Rs. \_\_\_\_\_ D.D No. \_\_\_\_\_

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

Bank : \_\_\_\_\_

13. E-mail ID (if any) : \_\_\_\_\_

Signature of the Principal / Officer i/c / HOD

Date :

Signature of Candidate

Note : Kindly inform the change of Address immediately

**ADDRESS SLIP (All Capital Letters)**

Name : \_\_\_\_\_  
Registration No: \_\_\_\_\_  
Address : \_\_\_\_\_  
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Phone No : \_\_\_\_\_  
Pin : \_\_\_\_\_

Name : \_\_\_\_\_  
Registration No: \_\_\_\_\_  
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