



उत्तर प्रदेश आयुर्विज्ञान विश्वविद्यालय, सैफई, इटावा

Uttar Pradesh University of Medical Sciences,

Saifai, Etawah- 206130 (www.upums.ac.in)

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APPLICATION FOR CORRECTION OF NAME IN THE MARK SHEET

(समस्त विवरण अंग्रेजी के कैपिटल लेटर्स में लिखा जाये)

| | | |
|------------------------------------|-------------------------------|-----------------------------|
| Name | | |
| Fathers Name | | |
| Gender (Male/Female) | | |
| Enrollment No. | | |
| Roll No. | | |
| Examination | (Month.....Year.....) | |
| Course | | |
| Mobile No. | | |
| Email ID. | | |
| Postal Address:- | | |
| Details of correction to be done:- | | |
| S. No. | Name printed in the marksheet | Name should be corrected as |
| 01 | | |
| 02 | | |
| 03 | | |

Note: The Student should fulfill the following criteria.

1. Fee receipt of Rs. 300/- (Three Hundred Only) per marksheet.
2. Photocopy of mark sheet (High School).
3. Photocopy of Adhar Card.

Signature of Candidate

Signature of HOD

Signature of Dean (Faculty of)