

ಬೆಂಗಳೂರು  
ನಗರ ವಿಶ್ವವಿದ್ಯಾನಿಲಯ



BENGALURU  
CITY UNIVERSITY

Office of the Registrar (Evaluation)

|                                                                                                                           |                        |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
|---------------------------------------------------------------------------------------------------------------------------|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------|-------------|-----------|-------------|-------------------|---------------------|--------|--------------------|--------|------------------|
| Application for the issue of<br>(Please Mention the document required)                                                    |                        | For Office Use Only<br>.....<br>C.W                      Supt                      A.R.                                                                                                                                                                                                                                                                  |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| 1.Name (IN BLOCK LETTERS)<br>(As Registered for University Exams)                                                         |                        |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| 2. Residential / Postal Address with Phone Number                                                                         |                        | .....<br>.....<br>.....                                                                                                                                                                                                                                                                                                                                  |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| 3. Name of the College / Department                                                                                       |                        |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| 4. a. Name of the Examination / Course / Branch                                                                           |                        |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| b. Details of Reg. No(s) with year & Month of Passing                                                                     |                        |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| Sl. Register Number                                                                                                       | I/II/III Year/Semester | Month & Year Exam                                                                                                                                                                                                                                                                                                                                        | Subject/Papers Passed |                     |             |           |             |                   |                     |        |                    |        |                  |
| 1.                                                                                                                        |                        |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| 2.                                                                                                                        |                        |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| 3.                                                                                                                        |                        |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| 4.                                                                                                                        |                        |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| 5.                                                                                                                        |                        |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| 6.                                                                                                                        |                        |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| 5. Indicate the Documents Required                                                                                        |                        |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| 6. Reason (s) for application for the above document(s)                                                                   |                        |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| 7. Indicate the change of Branch of College, if any,<br>Enclose the copy of permissions letter from the Registrar,<br>BCU |                        | 8.Details for Fees Payment<br><table border="1"> <tr> <td>Bank Account Number</td> <td>38016514441</td> </tr> <tr> <td>IFSC Code</td> <td>SBIN0040007</td> </tr> <tr> <td>Bank Account Name</td> <td>State Bank of India</td> </tr> <tr> <td>Branch</td> <td>Mysore Bank Circle</td> </tr> <tr> <td>Palace</td> <td>Bangalore 560002</td> </tr> </table> |                       | Bank Account Number | 38016514441 | IFSC Code | SBIN0040007 | Bank Account Name | State Bank of India | Branch | Mysore Bank Circle | Palace | Bangalore 560002 |
| Bank Account Number                                                                                                       | 38016514441            |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| IFSC Code                                                                                                                 | SBIN0040007            |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| Bank Account Name                                                                                                         | State Bank of India    |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| Branch                                                                                                                    | Mysore Bank Circle     |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| Palace                                                                                                                    | Bangalore 560002       |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |
| 9.Any Other Information                                                                                                   |                        |                                                                                                                                                                                                                                                                                                                                                          |                       |                     |             |           |             |                   |                     |        |                    |        |                  |

I hereby declare that the information furnished above are true and correct to best of my belief.

Place:

Date:

Signature of the Applicant

CERTIFICATE

1. Certified that the information furnished above are correct as per the records of the College.
2. Certified that the candidate had not rejected his / her results of any year/semester and not involved in any examination Mal-practice. Recommended for the issue of the document(s) applied.

Place:

Date:

Signature of the Chairperson/  
Chairman/ Director/ Coordinator/ Principal

**Documents Required to be enclosed with application during submission to Registrar  
(Evaluation) Office**

**NEP Batch**

**NEP – MIGRATION CERTIFICATE**

1. Duly filled in Online Application form with Principal Seal and Signature
2. No Due Certificate from the College / Department
3. Copies of all Semester Marks Cards (I to VI/VIII) / Result Sheets duly attested by Principal of the College/ Chairman of the Department
4. (1) Passport Size Photo
5. Proof of Online Payment Made

**NEP – PROVISIONAL DEGREE CERTIFICATE**

1. Duly filled in Online Application form with Principal Seal and Signature
2. Copies of all Semester Marks Cards (I to VI/VIII) / Result Sheets duly attested by Principal of the College/ Chairman of the Department
3. (1) Passport Size Photo
4. Proof of Online Payment Made

**NEP – OFFICIAL TRANSCRIPTS**

1. Duly filled in Online Application form with Principal Seal and Signature
2. Website to Apply for Official Transcripts **UUCMS.Karnataka.gov.in**
3. Copies of all Semester Marks Cards (I to VI/VIII) / Result Sheets duly attested by Principal of the College/ Chairman of the Department
4. Proof of Online Payment Made

**NEP – MEDIUM OF INSTRUCTION**

1. Duly filled in Online Application form with Principal Seal and Signature
2. Copies of all Semester Marks Cards (I to VI/VIII) / Result Sheets duly attested by Principal of the College/ Chairman of the Department
3. Course Competition Certification from the College – Kannada, English Medium
4. (1) Passport Size Photo
5. Proof of Online Payment Made