



COLLEGE OF ENGINEERING

(Managed by IHRD, A Govt. of Kerala undertaking)

Chengannur, Alappuzha (Dist.) - 689 121

Tel: 2454125, 2451424, 2450435, Fax: 0479-2451424

Application for Student Verification

Sl. No	Particulars	Details claimed by the applicant		
1.	Name of candidate			
2.	Date of birth			
3.	Name of University / Statutory board			
4.	a) Course attended		b) Branch:	
5.	a) Duration of Course		b) Scheme :	
6.	a) Admission No.		b) Year of Study:	
7.	Month and Year of final semester exam			
8.	Register No. of Examination			
9.	a) Result of exam as per records		b) Final year marks / Grade (CGPA)	
10.	Additional information required, if any			
11.	Details of documents attached for verification (<i>attach photocopy/scanned image with email</i>)			

Details of Institution /Agency requesting Verification

1.	Name of employer for which information is requested	
2.	Name of Verification agency / institution	
3.	Address	
4.	Phone No.	
5.	Email ID	
6.	Name & Designation of Person requesting information	
7.	Email ID to which verification report to be send	
8.	Address to which verification report to be sent by registered post, if required.	
9.	Details of verification fee remitted	DD No. for Rs./- dated:..... Bank remittance on at branch

Note: 1. For each candidate use separate form. Fee for multiple candidates can be paid by a single DD in favour of Principal

Fee once paid is non-refundable.

2. Processing fee of Rs. 500/- per candidate (Rs. 50/- extra towards postage, if report need to be sent by post) should be paid in the form of DD drawn in favour of "The Principal, College of Engineering, Chengannur" payable at "SBT, Chengannur"

3. Verification report will be forwarded within 4 working days from the date of receipt of application.



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Student Verification Report

Reference :			
Sl. No	Particulars	Details claimed by the applicant	Verification Status
1.	Name of candidate		
2.	Date of birth		
3.	Name of University / Statutory board		
4.	Course attended	Branch:	
5.	Duration of Course	Year / Semester Scheme:	
6.	Admission No.	Period of Study : to	
7.	Month and Year of final semester exam		
8.	Register No. of University Exam		
9.	Result of Exam as per institution records	Final year marks: / Grade (CGPA): n/a	
10.	Additional information, if any		
11.	Details of documents attached for verification (<i>attach photocopy/scanned image with email</i>)		
12.	Details of any information given in the form need to be corrected		

Details of Institution /Agency requesting Verification

1.	Name of employer for which information is requested	
2.	Name of Verification agency / institution / individual	
3.	Address	
4.	Email ID to which verification report to be send	

Date :

Prepared by:

Verified by:

office Seal

Approved

Sd/-
PRINCIPAL

(Forwarded in PDF format as email attachment)