

For Office use only  
Application No: .....  
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Date: .....



# St Berchmans College

Founded 1922

**AUTONOMOUS**

College with Potential for Excellence | Reaccredited by NAAC with A Grade

Changanassery, Kottayam, Kerala, India - 686 101, Ph: +91 9544 2000 37, E-mail: controller@sbcollege.ac.in

## APPLICATION FOR CONSOLIDATED MARK CUM GRADE CARD

1.	Name of the Candidate (in block letters)	
2.	Address with Phone No (in block letters)	
3.	Programme	
4.	PRN/Roll No	
5.	Whether Eligible for Grace Mark?	
6.	Whether applied for Revaluation/Scrutiny?	
7.	Whether results of any re-appearance exam (Supplementary/Betterment) are Pending?	

First Appearance Details		
Sl No	Semester	Month and Year of Exam Taken
1.		
2.		
3.		
4.		
5.		
6.		
Re-appearance Details		
Sl No	Semester	Month and Year of Exam Taken
1.		
2.		

Re-appearance Details		
Sl No	Semester	Month and Year of Exam Taken
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		

### Disclaimer

- I do hereby confirm that I am the bonafide student and applicant.
- I have not applied for the above service previously.
- I understand that if any discrepancy is found on verification, my application will be rejected.
- All information furnished above are correct to the best of my knowledge and belief.

Place:

Date:

Signature of the Candidate

NB: The candidate shall submit self attested copy of all mark lists issued to him along with the application.