

## MAHARAJA BIR BIKRAM UNIVERSITY

AGARTALA, TRIPURA, INDIA, PIN: 799004

## APPLICATION FORM FOR CORRECTION OF INFORMATION IN REGISTRATION CERTIFICATE/ MARKSHEET

(All should be written in capital letters)

NAME	NAME OF THE STUDENT:			
FATHE	R'S NAME:			
МОТНІ	MOTHER'S NAME:			
REGIST	REGISTRATION NO:			
SEMES'	TER:			
EXAMI	NATION ROLL NO (IF ANY):			
COURS	E NAME:			
NAME	OF THE SUBJECT:			
DETAIL	S OF THE INFORMATION FOR CO	ORRECTION:		
Sl. No.	Details of Existing Information	Details of Corrected Information	Remarks	
I certify	y that the particulars made 1	by me in this application for	m are correct	
and be	st of my knowledge.			
	Signature of the Candidate			
	Address:			
		Mobile:		
* Submit the Xero	ox copy of relevant document for cor	rection of information with the appl		
		concerned Department/ Colleg		
Date:	Signature of the Principal/ HOD/ In-Charge With seal			
		 ffice Use Only		
For Office Use Only				

101 011100 050 0111

Application No.: Date of Receipt: Signature of the Collector