

Ac .E III.

PROFORMA

Department/College:

Course for which students are recommended for the award:

Sl. No.	Name of the Candidate	Reg.No. & Year of passing all the parts of the B.Ed Examination of April/May..... with the name of the College through which appeared for the examination.	Marks			Whether the student is in receipt of any other Scholarships	Reg. No., year & Marks obtained by the candidate at the BA/B.Sc/M.Com Degree Examination	Remarks
			Sem. I	Sem. II	Total			
1	2	3	4	5	6	7	8	9

Certified that the candidates whose details are given above have passed all the parts of the Examination/Examinations at the first appearance and immediately after the completion of the course in the minimum period prescribed without interruption. The Register No., the year/years of passing and the marks noted against them have been verified with the original mark lists and are found correct.

Place:

Date:

(Office Seal)

Name and Signature of the principal/Head of the Department

Note: 1. The Register Number, year of passing each part and colleges through which appeared for the Examination shall be distinctly noted in the column provided for the purpose.

2. In addition to the details for the B.Ed Degree Examination, details regarding the Register Number, year of passing and the Marks secured for each part of the BA/B.Sc/M.Com Degree Examination should also be furnished in the respective column.

3. Col. (1) to (8) should not be left unfilled and particulars given under each must be clearly stated and complete in every respect.