

GUJARAT AYURVED UNIVERSITY

Accredited Grade "A" by NAAC (CGPA 3.28) Chanakya Bhavan, Jamnagar- 361 008

APPLICATION FORM FOR MERIT CERTIFICATE (Form fill should be Block Letters only)

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Name of the Applicant:												Mod	le of	payn	nent	
Residential Address:														, ,		
													: Ca	ash		
City (With Pin Code):													: De	eman	ıd Dra	aft
Mobile Number:												Ш				
E-Mail ID:												DD N	lo :.			
Date of Application:																
												Date	:			
To, The Controller of Examination Gujarat Ayurved University, Ja Sir,	mnaga				م ما	4 o with	Ca+:	£:	o D.41		.	:		.		fallows
I the undersigned request you	to Kin	ialy is	ssue	me t	ne iv	vierit	certi	псат	e. ivi	y acad	aem	іс ра	rticu	iiars a	are as	TOIIOWS
Name of Student												(In full	l and in	CAPITAL I	_etters, as	per Enrollmer
Enrollment / PRN Number																
Name of College																
Name of the Examination															(As pe	er Mark-sheet
Seat Number							M	onth	1 & Y	ear of	Pas	sing				
Result							I									
Total Marks obtained									Oı	ut of						
Purpose of Certification																
I hereby declare that, I have rea affirm that the details specified thereto in support of information my knowledge.	here i	in ab	ove a	and t	he se	elf-att	estec	I сор	ies o	f testi	mon	ials a	ınd c	ertific	cates	submitte
Yours faithfully, Signature of the Applicant	Inst 1. 2. 3.	2:00 Dem	se pay p.m. nand D se sub	or by D raft o r	emano the n is forn	d Draft name o n along	f Regis	trar, G	iujarat	Ayurv	ed Un	iversit	y, Jam	ınagar		30 a.m. to

Student's behalf.

student as well as Valid Photo Identity-card of the authorized person collecting the certificate on