

## SHAHEED BHAGAT SINGH STATE UNIVERSITY MOGA ROAD, (NH-05), FEROZEPUR-152004 (Established & Managed by the Punjab Govt.)

## <u>Application for issue of Bonafide Certificate</u> (<u>After completion of program/course</u>)

Name	:				
Father's Name :			Mother's Name:		
Roll No. :		Bran	Branch/Course:		
Batch :		Pres	Present Semester (if applicable):		
Mobile :		Email_ID:			
Details of	results:				
Sr. No.	Semester		SGPA	CGPA	
1	First				
2	Second				
3	Third				
4	Fourth				
5	Fifth				
6	Sixth				
7	Seventh				
8	Eighth				
9	Ninth				
10	Tenth				
Fee detai	ls(attach origina	l receip	ot):		
•	dent may click on the su.ac.in/SDetail.as	_		re fee to be deposited.)	
Receipt No.:			Date:	Amount:	
Date:				Signature of Candidate	
Enclosure	s: 1) ) Photocopies	of all DN	ACs/Degree/Grade	e statements (In case, DMCs has no	

Enclosures: 1) ) Photocopies of all DMCs/Degree/Grade statements (In case, DMCs has not been issued, attested copies of all final result notifications by Head of Concerned department)

2) Original fee receipt

3) ID proof of Concerned Student

**Forwarded to COE** 

(Signature & Seal of HOD)