SKILL PROMOTION COUNCIL

<u>Entry No.</u>

APPLICATION FORM FOR CORRECTION/CHANGE OF NAME

Registration Number of the Candidate:	Course:
	Technology/Trade:
CORRECTION REQUESTED FROM TO	
NAME:	(Correct entry as per Matric Certificate) NAME:
FATHER'S NAME:	
	FATHER'S NAME:
DATE OF BIRTH:	DATE OF BIRTH: - -
NAME OF INSTITUTION:	
Residential Address of the Candidate:	
Candidate Phone No/Mobile No:	Signature of Candidate
VERIFICATION BY FINANCE SECTION:-	
FEE DEPOSITED	
(The candidate should give the detail as below)	
Rs: Dated: Dated:	
Income Assistant	Supdt
ACTION TAKEN BY THE REGISTRATION SECTION:	
CORRECTION HAS BEEN MADE ACCORDINGLY	
Dealing Official Superintendent Assistant Secretary Peristration	
Dealing Official Superintendent	
(<i>To be filled in by the candidate</i>) (i) 1 st Year Roll No: 1 st / 2 nd A/Exam 200	<u>Action Taken by the Concerned Examination Section</u> Correction Has Been Made Accordingly
(ii) 2 nd Year Roll No: 1 st / 2 nd A/Exam 200	
(iii) 3 rd Year Roll No: 1 st / 2 nd A/Exam 200	— Dealing Official Supdt. AC(Exam)
(The rate of fee is given overleaf)	
ACTION TAKEN BY THE CERTIFICATE SECTION: CORRECTION HAS BEEN MADE ACCORDINGLY	
Dealing Official Superintenden	t Assistant Secretary Certificate
(Should be kept in record in Certificate Branch)	
SKILL PROMOTION COUNCIL	
ACKNOWLEDGMENT SLIP	
Application Form for:	
Application Form for:	
Application Form for: Detail of Original Documents with the Application Form:	
Application Form for: Detail of Original Documents with the Application Form: Detail of Attested Copies of Documents Attached:	