

E/CR-1
PANJAB UNIVERSITY, CHANDIGARH
Application Form for Confidential Result
(for all examinations)

Fee remitted: Rs.....Bank Draft No.....Dated.....
University Receipt No.....Dated.....

1. Name of the candidates (IN CAPITALS)
(Leave one blank space each to indicate different parts of the name)

2. Father's Name (IN CAPITALS)
(Leave one blank space each to indicate different parts of the name)

3. Mother's Name (IN CAPITALS)
(Leave one blank space each to indicate different parts of the name)

4. Name of the examination.....Session and Year/Semester.....

5. Roll No..... Registration No.....

6. Reason(s)/Purpose(s) of applying for the confidential result:
(i)
(ii)
(iii)

7. Name(s) and complete address(es) of the Institution(s)/ Organisation(s) where the confidential result is to be sent under sealed cover:
(i)
(ii)
(iii)

Place:.....
Date:.....

.....
(Full signatures of the candidate)
Full address of the candidate
.....
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