



Application No.: _____

BABU DINESH SINGH UNIVERSITY

Farathiya, Garhwa – 822114, Jharkhand

APPLICATION FORM FOR AWARD OF DEGREE CERTIFICATE FOR FIRST CONVOCATION-2026

****Please fill the form in BLOCK LETTERS. All fields marked (*) are mandatory.****

To,
The Registrar,
Babu Dinesh Singh University, Garhwa, Jharkhand.

Through: Dean/ Principal/ HoD,
_____ College/Department/ Institution

Sir,

I respectfully submit that I have successfully completed the **BDS/MDS /BHMS/MD. (Hom)/B.Sc. Pathology /D.Pharm /B.Pharm /B.Tech.** programme from _____ (Name of the College /Department/Institution), Babu Dinesh Singh University, Garhwa, passed (Year)_____. I hereby apply for the award of my Degree Certificate. My particulars are furnished below for your kind consideration:

A. APPLICANT'S DETAILS

1. **Name of the Applicant** (As per University Records)*

2. **Name of the Applicant** (हिंदी में)*

3. **Father's Name***

4. **Mother's Name***

5. **Date of Birth:** ____ / ____ / ____

6. **Gender:** ☐ Male ☐ Female ☐ Other

7. **Mobile No.*:** _____

8. E-mail ID*: _____
9. ABC ID (if available): _____
10. Aadhaar No. : _____

B. ACADEMIC DETAILS

1. University Registration/Enrollment No.*

2. Roll No.*

3. Session/Batch*

4. Programme/Degree*

5. Branch/Subject/Specialization*

6. College/Department/Institute Name*:

7. Year of Admission: _____

8. Year of Passing*: _____

9. Month & Year of Final Examination*

10. Division/CGPA/Percentage

C. MODE OF RECEIVING DEGREE

Please tick (✓) one option:

- ☐ I shall attend the First Convocation in person and receive the Degree Certificate.
- ☐ I am unable to attend the Convocation and request the University to issue my Degree Certificate after the Convocation as per University rules.

D. COMMUNICATION ADDRESS

Present Address*:

City: _____

State: _____

PIN Code: _____

E. PAYMENT DETAILS

- **Degree Certificate Fee : ₹5,000/-**
- **Application Form Fee : ₹500/-**

Total Amount Paid: ₹5,500/-

Mode of Payment:

☐ Demand Draft

☐ RTGS/NEFT

DD/UTR No.: _____

Date: ____ / ____ / ____

Bank Name: _____

F. DOCUMENTS ENCLOSED

Please attach self-attested copies of the following:

☐ Final Year/Semester Admit Card

☐ Final Year/Final Semester Mark Sheet

☐ Provisional Certificate (if issued)

☐ 10th Certificate/Marksheet

☐ Aadhaar Card/Identity Proof

☐ Passport Size Photograph (02 Nos.)

☐ Fee Payment Receipt / Demand Draft

☐ Any other (Specify): _____

G. DECLARATION BY THE APPLICANT

I hereby declare that all the information furnished in this application form is true and correct to the best of my knowledge and belief. I further declare that I have successfully completed all the requirements prescribed for the award of the Degree and have no outstanding dues payable to the University/College. I understand that if any information furnished by me is found to be false or incorrect, my application shall be liable to rejection without assigning any reason.

Place: _____

Date: ____ / ____ / ____

Signature of Applicant

H. CERTIFICATE BY THE COLLEGE/INSTITUTE

Certified that the above particulars have been verified from the records of the College/Institute and found correct. The candidate has successfully completed the prescribed programme and is recommended for the award of the Degree.

Date: ____ / ____ / ____

Signature of Principal/Dean

Name: _____

Seal of the College/Institute

I. FOR OFFICE USE ONLY

Application Received on: _____

Documents Verified: ☐ Yes ☐ No

Fee Verified: ☐ Yes ☐ No

Eligible for Award of Degree:

☐ Recommended

☐ Not Recommended

Remarks: _____

*** END***



BABU DINESH SINGH UNIVERSITY

Farathiya, Garhwa – 822114, Jharkhand

APPLICATION FORM FOR REGISTRATION OF GRADUATES

Application Form

To,
The Registrar,
Babu Dinesh Singh University, Garhwa

Sir/Madam,

I request that my name be entered in the Register of Registered Graduates in accordance with Section 8, Sub-section (V) of the Babu Dinesh Singh University Act, 2022 (Jharkhand Act No. 06, 2023).

1. Name (in Devanagari Script):.....

(in Roman script - Block Letters):.....

2. Date of Birth:.....

(An attested copy of the Secondary Examination certificate must be attached as proof.)

3. Father's Name:.....

4. Mother's Name:.....

5. Permanent Address:.....

.....

6. Present Address:.....

.....

7. Details of Degree Obtained (Name of Degree) Year

Name of College/Department:.....

8. Current Occupation:.....

9. Date of Application:.....

Yours faithfully,

Applicant's Full Signature

Memo No.
Forwarded

Dean/Principal of College/Department
Seal