



DG 1/2, Action Area I, New Town, Kolkata, West Bengal -700156 $\,$

Application No: SNU/CC//.	
For Office Use only	

APPLICATION FORM FOR CHARACTER CERTIFICATE

Name of the Student:						
Student ID:			Registration Number:			
Department:	ment: Program:					
Year of Admission: Current Semester/Y				ABC ID:		
Address for Communication:						
Contact No:			E-mail ID:			
Reason for character certificate request:						
DECLARATION: I				m that the information furnished by Signature of the Candidate		
		For Offic	e Use Only			
Name of the Student:			Academic Year:			
Student ID:			Registration Numb	er:		
CGPA:	Program:					
-Verified-						
(Signature with Date) (Signature with Date)						
				[Office of COE]		
(Signature with Date)			(Signature with Date)			
Name:[Library]			Name:[Admin Office]			
(Signature with Date)			(Signature with Date)			
Name:			Name:[Office of Registrar]			
Application No: SNU/CC// APPLICATION FORM FOR CHARACTER CERTIFICATE						
Name of the Applicant:						
Student ID: R		Registration Number:				
Program:		1				
Received by (Name)		Signature	with Date			