

Maharashtra National Law University Mumbai

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Form No.:			

Application	n for Du	nlicato	Statement	of Marks
Abblicatio	n tor <i>i ju</i>	nuuule	Stutement	OI IVIUTK!

Surname:	First Name:	Middle Name:	Mother's Name:
Gender:	Nationality:		Date of Birth: / /
Address for Correspond	ence:		
District:	State:		Pin Code:
Phone No.:	Mobile No.:		Email ID:
Academic Details:			
Examination:		Faculty:	Month & Year.:
Enrollment No.:	Date of R	esult Declaration:	
Class or Grade Obtained	1:		· t
Payment Details: (P	ayment mode: Cash/O	nline)	
Challan No.:	Challar	n Date: / /	
Total Amount:	Bank (If Online Payment):	
Γhanking You,			Yours faithfully,
			(Signature of Candidate)

Enclosures:

- 1. Fees Challan copy
- 2. Self Declaration/Undertaking application
- 3. FIR copy

Note: printout of the Application along with the above Enclosure is to be submitted in the Board of Examination, University.