



**APPLICATION FOR ISSUE OF DUPLICATE CERTIFICATE**

Certificate for which applied : Statement of Grade / Consolidated Grade Statement /  
Provisional Certificate / Degree Certificate  
Degree of study :  
Branch :  
Period of Study :  
Details of payment made : Receipt No. / D.D. No. :  
Date :  
Amount :

1. Name of the Candidate :
2. Register Number :
3. Month & Year of Exam :  
(for Statement of Grade)
4. Circumstances under which the :  
certificate was lost
5. Whether the prescribed affidavit :  
has been enclosed
6. Address to which the certificate :  
is to be sent with Mobile No.

Place :

Date :

***Signature of the Candidate***

***Signature of the HOD/Director***  
(for students currently studying)

*For Office Use Only*

Certificate issued on :

Prepared by :

Foil No./Sl.No. :

Examined by :

**CONTROLLER OF EXAMINATIONS**

Documents to be enclosed:

1. Affidavit neatly typed on a stamp paper of value not less than Rs.10/- and duly signed by the candidate and attested by a Notary Public as per the format enclosed.
2. Demand Draft / Receipt for the cost of duplicate Certificate (Cost for each duplicate certificate is Rs.1000/-) favouring "REGISTRAR, Karunya Institute of Technology and Sciences), payable at 'COIMBATORE'.

Format for the AFFIDAVIT to be filed for the issue of Duplicate Certificate: (to be typed on a stamp paper for value not less than Rs.10/-)

**Affidavit of Thiru / Selvi** \_\_\_\_\_

1. I \_\_\_\_\_ son / daughter of  
\_\_\_\_\_ aged \_\_\_\_\_ years  
an old student / student of Karunya Institute of Technology and Sciences,  
Coimbatore – 641114 with Register Number \_\_\_\_\_ and  
residing at \_\_\_\_\_  
\_\_\_\_\_

do hereby solemnly and sincerely state as follows:

2. My \_\_\_\_\_ (degree) statement of grade /  
Consolidated Grade Statement issued relating to the examinations held  
during \_\_\_\_\_ issued by the Karunya Institute of  
Technology and Sciences, Coimbatore – 641 114 has irrevocably been  
lost / destroyed.
3. I file this affidavit for the purpose of receiving duplicate certificate.
4. The duplicate certificate shall be returned to the Institute once my original  
certificate(s) is / are recovered by chance.
5. The facts stated are true and correct to the best of my knowledge and if  
found false by the Institute, I shall abide by the decision of the Institute.
6. Solemnly affirmed  
at (*place*) \_\_\_\_\_  
this (*date*) \_\_\_\_\_  
(month & Year) \_\_\_\_\_

and his/her signature affixed in my presence

***Signature of the Candidate***

Before me

Notary Public :

Address :

Office seal :

*Note: (Passed out students should sign in the presence of a Notary Public.  
Students currently studying need not get the signature of the Notary Public)*