

Nirma University, Ahmedabad

[Examinations Section]

Instructions to Apply for:

- (1) Rank Certificate
- (2) Medium of Instruction (Language) Certificate
- (3) Scheme showing Conversion of Grade to Percentage Certificate
- (4) Others Certificate ...

1. Fill-up the application form for Certificate. Application Form is attached herewith in **Appendix - 'A'** and also available at Examination Section of University.
2. If student cannot come personally, student can authorise someone to initiate the process on his/her behalf and inform the authorised person to bring the Authority Letter (**Appendix - B**) and his/her self-attested photo ID proof. (Govt. Issued Driving License/Passport/PAN Card and Aadhaar Card)
3. Attach the self-attested photo ID proof of student with application form.
4. Attach the Photocopy of Transcript / Semester Grade Report.
5. An applicant can send soft copy (PDF) of Transcript/ Last Semester Grade Report in advance through email.
6. Fees for any of the above Certificate is **Rs. 500/-**

- Postage Charges: (I) Out side India - Rs.2000 for each envelope.
(II) Within India - Rs. 300 for each envelope.

- Mode of Payment: (I) Cash
(II) Payment through NEFT:
▪ Name of the Beneficiary: **Nirma University**
▪ Bank Account Number: **09720180085**
▪ Bank Name: **The Kalupur Comm. Co. Op. Bank Ltd. - Nirma University Branch**
▪ IFSCCode: **KCCB0NRM097**

The process of application will be initiated only after the confirmation of payment of the fees.

7. The process of application will be declined if the Documents furnished are incomplete.

Note: 1. Issuance Period - Minimum 01 working day.
2. **Office hours:** Monday to Friday: **11:00 AM to 06:15 PM** and Saturday: **8:45 AM to 04:45 PM**
(Holiday observed on 2nd & 4th Saturday), Recess hours: **2.00 PM to 2.30 PM.**

For any query and clarification, please contact to the office of Examinations Section of University

Contact Details: Email: **Verification@nirmauni.ac.in**
Tele No.: **079 71652 672 – 671, 02717 241911-12**

Correspondence address: Deputy Registrar (Examinations Section)
Nirma University
Sarkhej-Gandhinagar Highway, Chharodi
Ahmedabad 382 481, Gujarat, India

Nirma University, Ahmedabad

[Examination section]

Application for Rank Certificate
 Medium of Instruction (Language)
 Scheme showing Conversion of Grade to Percentage Certificate
 Other Certificate _____

To,

Deputy Registrar
 Examination Section
 Nirma University,
 Ahmedabad - 382481

Email: verification@nirmauni.ac.in

Sir,

I need above mentioned Certificate(s) and my details for the same are given here under:

Name of the student _____

Roll No. _____ Programme Name: _____

Programme Completed Month & Year: _____

E. Mail. : _____ Mobile No. _____

(Name & Signature of the Applicant)

Date: _____

For Office Use Only

To,

Account section.

Nirma University, Ahmedabad.

Pl. accept total fees of towards __ Rank Certificate / __ Scheme showing
 Conversion of Grade to Percentage Certificate / __ Medium of Instruction (Language) Certificate/
 Other certificate - _____

for Roll/Exam. No. _____ Student's Name _____

Office Supdt.

Letter of Authority

I, _____ (Name of Student), Roll No. _____
Programme _____ presently residing
at _____ (full address)
hereby authorise Mr./Ms. _____ Age _____ residing
at _____ (full address),
Telephone No. (M) _____ e-mail id _____ to act on my behalf in the
matter related to verification (authentication) of my educational documents/Pay the fees/Apostille/Duplicate documents/to
collect original documents (SGRs/ Transcript/Degree Certificate) or Verified sealed envelope(s) from Examination Section –
Central Office of Nirma University and it will be considered by the University as acknowledged by me.
I attach my Identity proof in support of verification of my signature and authorised person will also submit his/her Photo-ID
proof.

Signature of Student with Date

Signature of Authorised Person with Date

(For Office Use)

Acknowledgement

I have received following documents from Nirma University for _____
(Name of Student)
on his/her behalf and I acknowledge for the same.

- 1. _____
- 2. _____
- 3. _____
- 4. _____

Signature of Authorised Person with Date