



**SADAKATHULLAH APPA COLLEGE (AUTONOMOUS)**  
**RAHMATH NAGAR, TIRUNELVELI – 627 011.**  
Reaccredited by NAAC at an 'A++' Grade with a CGPA of 3.56 out of 4.0 in the IV Cycle  
ISO 9001:2015 Certified Institution

**OFFICE OF THE CONTROLLER OF EXAMINATIONS**

**APPLICATION FOR NAME / INITIAL CORRECTION IN MARK STATEMENT**

1. Name of the Candidate as in Certificates :
2. Register Number/Roll No :
3. New name of the Candidate with initial in English  
(In BLOCK LETTERS) :
4. Programme :
5. Branch / Major :
6. Period of Study :
7. Month and Year of Passing (last appearance) :
8. Semester wise Mark statement (or) Consolidated  
Mark statement. If semester wise – Mention the  
Particular semester (or) semesters. :
9. Address for Communication with Pin code :

Mobile No : \_\_\_\_\_

Place :

Date :

**Signature of the Candidate**

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**FOR OFFICE USE ONLY**

Note to Account Section :

Please Collect \_\_\_\_\_ only

Receipt No. & Date : \_\_\_\_\_

Signature of the Office Accountant

**Controller of Examinations**

Certificate Issued on :

Prepared by :

Certificate No :

Examined by :

**Controller of Examinations**

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**Received the Certificates(s)**

**Date:**

**Signature of the Student**

**Instructions for applying Name Correction in the statement of marks /  
Consolidated statement of marks.**

1. The Candidate may apply for Name correction in the Statement of Marks / Consolidated Statement of Marks in person
  
2. If the candidate found out any errors in the name or initial or their photo may apply
  
3. Duly filled in application should be submitted to the Controller of Examinations along with
  - 1) Original mark statement /Original Consolidated Statement of Marks in which the correction is required.
  
  - 2) Photo copy of 12<sup>th</sup> Transfer certificate [TC].
  
  - 3) Photocopy of 12<sup>th</sup> Mark Statement.
  
  - 4) Prescribed fee should be paid through bank challan. A college copy of the challan should be submitted to the COE office. Fees once paid will neither be refunded nor adjusted against any other fee under any circumstances.
  
  - 5) Application shall be complete in every aspect to avoid delay in issue of the Certificate.
  
  - 6) Name correction in the Statement of Marks/Consolidated Statement of Marks will be issued in about 10 working days.

**BANK COPY**

**COLLEGE COPY**

**STUDENT COPY**

**SADAKATHULLAH APPA COLLEGE  
(AUTONOMOUS),  
RAHMATH NAGAR, TIRUNELVELI –11.**

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(AUTONOMOUS),  
RAHMATH NAGAR, TIRUNELVELI –11.**

**CANARA BANK  
SAC - EXAMINATION  
ACCOUNT(CURRENT)  
ACCOUNT NO: 2998201000076**

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Date : .....

Date : .....

Date : .....

**Reg. No. :  
Name :  
Class :  
Semester :**

**Reg. No. :  
Name :  
Class :  
Semester :**

**Reg. No. :  
Name :  
Class :  
Semester :**

PARTICULARS	No. of papers	AMOUNT Rs.
Theory		
<b>TOTAL</b>		

PARTICULARS	No. of papers	AMOUNT Rs.
Theory		
<b>TOTAL</b>		

PARTICULARS	No. of papers	AMOUNT Rs.
Theory		
<b>TOTAL</b>		

**Rs. ....  
.. Only**

**Rs.. ....  
.. Only**

**Rs. ....  
.. Only**

Remitter's Signature  
(College copy & Student copy should to be returned to the Remitter)

Cashier

Remitter's Signature

Cashier

Remitter's Signature

Cashier

Denominations	Rs.
2000/1000*	
500*	
200*	
100*	
50*	
20*	
10*	
coins	
<b>TOTAL</b>	

Denominations	Rs.
2000/1000*	
500*	
200*	
100*	
50*	
20*	
10*	
coins	
<b>TOTAL</b>	

Denominations	Rs.
2000/1000*	
500*	
200*	
100*	
50*	
20*	
10*	
coins	
<b>TOTAL</b>	