

POKHARA UNIVERSITY

Office of the Controller of Examinations

Pokhara Metropolitan City-30, Kaski

	H &	oknara metropolitan City-30,	Kaski
			Date:
То			
The C	ontroller of Examination	n	
Pokha	ra University, Kaski.		
Subjec	ct: Request for the Cor	rection of Certificate(s).	
Dear S	Sir/Madam,		
I wou	ld like to request for	the correction of the certifica	ate(s) issued by the Office of the
Contro	oller of Examinations.	The details of the correction re-	quired are as follow:
1	Tick the certificate to	he corrected:	
			ance Contificate () a Others ()
a.	Transcript () b. Frovis	onar () c. wiigrauon () u. De	gree Certificate () e. Others ()
2.	Details of the correction required:		
	Title	Mistake	Correct
	Student's Name		
	Date of Birth		
	Father's Name		
	Transcript Number		
	cant's Signature:		
		Faculty	:
Colleg	ge :	Prograi	m :

Required Documents:

Date

Please attach the following document along with this application.

- 1. Original Certificate(s) to be corrected.
- 2. Photocopy of citizenship. (if name/date of birth is mistake)
- 3. If the mistake is found to be from the applicant's side then the applicant should also submit a Bank Voucher*.

: Contact Number :

^{*} Bank voucher means the voucher required from the Kamana Sewa Bikas Bank, Saving A/C 1200300027317000001 or Nepal Investment Bank Ltd., Saving A/C 01105020011938 after depositing required fees for the service in the name of PU EXAM CONTROL OFFICE.