

POKHARA UNIVERSITY
Office of the Controller of Examinations
Kaski, NEPAL

DETAIL FORM FOR TRANSCRIPT

SN	Code	Course Title	Credit	Grade	Passed Year(Year)..... Fall/Spring	SN	Code	Course Title	Credit	Grade	Passed Year(Year)..... Fall/Spring
First Semester						Second Semester					
1.						1.					
2.						2.					
3.						3.					
4.						4.					
5.						5.					
6.						6.					
7.						7.					
8.						8.					
9.						9.					
10.						10.					
Total credit hour						Total credit hour					
Semester Grade Point Average (SGPA)						Semester Grade Point Average (SGPA)					
Third Semester						Fourth Semester					
1.						1.					
2.						2.					
3.						3.					
4.						4.					
5.						5.					
6.						6.					
7.						7.					
8.						8.					
9.						9.					
10.						10.					
Total credit hour						Total credit hour					
Semester Grade Point Average (SGPA)						Semester Grade Point Average (SGPA)					
Fifth Semester						Sixth Semester					
1.						1.					
2.						2.					
3.						3.					
4.						4.					
5.						5.					
6.						6.					
7.						7.					
8.						8.					
9.						9.					
10.						10.					
Total credit hour						Total credit hour					
Semester Grade Point Average (SGPA)						Semester Grade Point Average (SGPA)					
Seventh Semester						Eight Semester					
1.						1.					
2.						2.					
3.						3.					
4.						4.					
5.						5.					
6.						6.					
7.						7.					
8.						8.					
9.						9.					
10.						10.					
Total credit hour						Total credit hour					
Semester Grade Point Average (SGPA)						Semester Grade Point Average (SGPA)					

SN	Code	Course Title	Credit	Grade	Passed Year(Year)..... Fall/Spring	SN	Code	Course Title	Credit	Grade	Passed Year(Year)..... Fall/Spring
Ninth Semester						Tenth Semester					
1.						1.					
2.						2.					
3.						3.					
4.						4.					
5.						5.					
6.						6.					
7.						7.					
8.						8.					
9.						9.					
10.						10.					
Total credit hour						Total credit hour					
Semester Grade Point Average (SGPA)						Semester Grade Point Average (SGPA)					
						Sum of Credits in all Semesters					
						Cumulative Grade Point Average CGPA (Official Use)					

I declare that the particulars given above are correct. I have attached all documents required to receive the transcript.
I agree that false information or insufficiency of documents will lead to my inability of receive Transcript.

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Signature of applicant

Date:.....