



ST MARY'S COLLEGE (AUTONOMOUS), THRISSUR-20

APPLICATION FOR CONSOLIDATED MARKLIST **AFTER CLEARING SUPPLEMENTARY EXAMINATION**

1. Name of the Candidate :
(IN BLOCK LETTERS)
2. Address & Contact Number :
3. Name of the Department :
4. Programme & Year of Study :
5. Register Number :
6. E-mail ID :
7. Details of Examination passed :

Semester	Month & Year of Passing	SGPA	GRADE
Semester I			
Semester II			
Semester III			
Semester IV			
Semester V			
Semester VI			
Semester VII			
Semester VIII			

8. Details of Fee Remitted :

Transaction ID	Date	Amount	Name of remitter

DECLARATION

I declare that the details furnished above are correct to the best of my knowledge.

Place:

Date:

Signature of the Candidate