



JEPPIAAR INSTITUTE OF TECHNOLOGY

(An Autonomous Institution)

Self-Belief | Self Discipline | Self Respect

Kunnam, Sunguvarchatram, Sriperumbudur-631604



OFFICE OF THE CONTROLLER OF EXAMINATIONS **APPLICATION FOR CORRECTION IN CERTIFICATES**

1.	Name and Address of the candidate (NAME AS REGISTERED IN COE OFFICE)	
2.	Register Number (12 Digits)	
3.	Course / Branch / Semester	
4.	Date of Birth	
5.	New name (Name to be updated) in CAPITAL LETTERS	
6.	Proof for New Name (Tamil Nadu Gazette page no. (in case of name change) /10 th & 12 th Mark statement (in case of correction, WHILE UNDERGOING THE COURSE)	
7.	Date of issue of Proof Attached	
8.	Contact Phone number & Email ID	

List of Enclosures:

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

DECLARATION

I hereby declare that all the details furnished above are true and correct to the best of my knowledge and belief.

Date:

Signature of the Candidate

Verified & Recommended

Forwarded

Head of the Department

PRINCIPAL

FOR OFFICE USE ONLY

Certificate issued on :

Prepared by :

Certificate No. :

Examined by :

CONTROLLER OF EXAMINATIONS