Date: / /20

**VERIFICATION REPORT**

We hereby verify the following information as correct as per our records (fill in the details of the student you wish to verify):

|  |  |
| --- | --- |
| Student’s Full Name: |  |
| GR No. / Exam Seat No: |  |
| Degree: | Bachelor/ Master of Engineering |
| Course Name  |  |
| Year of Admission: |  |
| Year of Passing: |  |
| CPI / Marks: |  |
| University: |  |
| Medium of Instruction: | English |
| Additional Information (if any): | --- |

Principal