

# CHAUDHARY DEVI LAL UNIVERSITY, SIRSA



(Established by the State Legislature Act 9 of 2003)  
Approved under Section 2(f) and 12(B) of UGC Act, 1956

## Application Form for Confidential Result

(Particulars to be filled in by the candidate in his/her own handwriting)

1. Name :..... Roll No:.....
2. Father's Name:.....
3. Name of Examination:.....Session.....
4. Name of College (If Regular Candidate).....
5. Purpose of Confidential Result:.....
6. Name and Address to whom the Confidential Result is to be sent (Documentary proof attached)  
.....  
.....  
.....
7. The Fee of Rs. 200/- deposited vide University Receipt No. & Date.....  
Draft No.....Dated.....for Rs.....

I solemnly declare that the statement given above is correct and for any concealment of facts, I shall be responsible for all the consequences imposed by the University.

Dated:.....

.....  
(Signature of the applicant)

Address:.....

.....  
Phone No.....

Certificate that the above mentioned particulars and reasons given by the applicant for his/her confidential result are correct.

Dated.....

.....  
(Signature of the attesting  
Authority with office stamp)

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### FOR OFFICE USE ONLY

Discrepancy in application, if any.....

Recommended/Not Recommended.....

Reasons.....

Assistant

Dealing Clerk