

**PROFORMA TO DETERMINE THE BONAFIDE STATUS OF THE CANDIDATE / INSTITUTE / COLLEGE / UNIVERSITY
(To be deposited with Services Selection Board, J & K on the official letter head of University / College / Institute)**

- 1) Name of the Candidate.....(In block letters)
- 2) Parentage.....3) Date of Birth.....
- 4) Address.....
-5) category.....

6) Details of Degree / Course / Institute / College / University

- a) Name of the Institute / College / University.....
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- b) Name of the Degree / Course with details of marks secured.....

Details of Marks secured

	Maximum Marks	Marks Obtained	Percentage		Maximum Marks	Marks Obtained	Percentage
1 st Semester / year				5 th Semester / year			
2 nd Semester				6 th Semester / year			
3 rd Semester / year				7 th Semester			
4 th Semester / year				8 th Semester			
AGGREGATE							

- c) Date of admission.....e) Date of Joining.....
- f) Duration of the Course.....g) Registration No.....
- h) Mode of Completion(Regular / Correspondence /Study Center)
- i) Status of the Institute / College / University(Deemed / Affiliated)
- j) *Whether the candidate has completed his / her course in main campus.....(if No) please furnish the following details:*

- a) Name and Address of the institute / college where the candidate has competed his / her course:-
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- b) Name and Address of the University with which the institute / college is affiliated
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- 7) It is certified that the character of the candidate during the stay w.e.f.....to
.....in the institute / College / University has remained satisfactory. Any other
comments, please record.....

[Seal and Signature of the Competent Authority]