



**SRIMANTA SANKARADEVA UNIVERSITY OF HEALTH SCIENCES**

(A State University of the Govt. of Assam)

Narakasur Hilltop, Bhangagarh, Guwahati-781032, Assam

Phone: 6026177313 (O) E-mail: ssuhs\_assam@yahoo.in Website: www.ssuhs.in

**Application Form for Rank Certificate**

1. Name of Examination/ Course : .....
2. Name of applicant in full (**in block letters**) : .....
3. University Registration No. : .....
4. Father's name in full (**in block letters**) : .....
5. Mother's name in full (**in block letters**) : .....
6. Nationality : .....
7. Mobile No. : .....
8. Permanent Address : .....
9. Present Address : .....
10. Details of payment of requisite fees:

Amount of Fees paid (Rs.)	Online Receipt No. (Please enclose copy of E-Receipt)	Date of Payment

**DECLARATION BY THE APPLICANT**

I declare that the above entries in the form have been filled up in my own hand-writing and the entries made are correct as per my documents and to the best of my knowledge and belief. I agree that if any statement made above is proved to be false, I shall be liable for legal action for submitting false information and statements.

Date : .....  
Place : .....

Signature of the applicant in full

**RECOMMENDATION OF THE PRINCIPAL/HEAD OF INSTITUTION**

This is to certify that ..... Registration No.....  
of..... Examination Roll No. .... a student of.....  
College passed the ..... Examination held in .....

The Certificate may be issued to the applicant by the University. This certificate is to be signed by the Principal/ Head of the Institution in which the candidate has studied.

Date : .....

Signature of Principal/Head of Institution with Office Seal  
.....  
(Name of institute)

**FOR OFFICE USE ONLY**

Checked by

Recommended by Registrar / Controller of Examinations

## INSTRUCTIONS

1. The application must be complete in all respect for processing at the University. Incomplete application form shall not be processed.
2. The applicant must enclose Photostat copies of the following documents, attested by Govt. Gazetted Officer or Principal/ Head of the Institution of the concerned Examination / Self attested –
  - University Registration Certificate
  - All Mark Sheets of the concerned Examination
3. **The applicants are to pay the requisite fee through online payment gateway available in SSUHS website (Fee Collect). A copy of E-Receipt is to be submitted along with the Application Form.**
4. Applicant must submit the Original Money Receipt at the time of receiving the Certificate.
5. If the applicant desires to obtain the Original Pass Certificate through authorized person, he/she has to submit an Authorization having original signatures of both the applicant and the authorized person.

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