

SANTUSHTI AYUERVEDIC MEDICAL COLLEGE AND HOSPITAL

Hinauti, Dagmagpur, Chunar, Mirzapur, Varanasi (Uttar Pradesh) India

Website : <https://santushtiyurvedicmedcialcollege.co.in>

Email : principal@santushtiyurvedicmedcialcollege.co.in

VERIFICATION FORM

Student Name (In English) _____

Father's Name (In English) _____

Mother's Name (In English) _____

Date of Birth _____ Course _____

Annual / Semester _____ Session / Year From _____ To _____

Registration Number _____ Last Year/Sem Roll Number _____

Postal Address for Verification Letter / E-mail Id for Verification :

Name (Individual/Deptt.) _____

Village / City _____ Post Office _____

Mohalla _____ St. No. _____

Tehsil _____

Distt. _____

Pin Code _____ Phone Number _____

Marksheet Details (If Any)

Signature / Signature and Stamp (if Dept.)

Note: Verified Result Card will be returned after 10 working days at urgent basis and 20 working days at ordinary basis. After one month this section is not responsible for any claim.