

ETERNAL UNIVERSITY, BARU SAHIB



Students No Due Certificate

Name:

Father's Name:

Registration Number:

Name of Course:

Date of Admission:

Date of Leaving:

Contact Number:

Reason:

S.No	DEPARTMENT	SIGNATURE	REMARKS
1	Electronic Lab		
2	Electrical Lab		
3	Computer Lab		
4	Chemistry Lab		
5	Physic Lab		
6	Food Tech. Lab		
7	Mechanic Lab		
8	Workshop Head		
9	Library Head		
10	IT Head		
11	Sports In-charge		
12	Hostel Warden		
13	Photostat Cell		
14	Examination Branch		
15	Registrar office		
16	Account office		
17	DSW		
18	TPO		
19	Class In-charge		
20	Head of Department		
21	Dean concerned College		

Date:

Signature of Student

Distribution	1. Accounts (original copy)	2. DSW
	3. Registrar office	4. Concerned Dean/HoD

