



All India Council For Vocational & Paramedical Science

(Run by All India Council for Vocational & Paramedical Science)

MARKSHEET VERIFICATION FORM

1. Study Centre Name :

2. Study Centre Code :

3. Registration No. :

4. Name of the Student in CAPITAL Letter (Leave One Blank after one word):

5. Father's Name in the CAPITAL Letter (Leave One Blank after one word):

6. Mother's Name in the CAPITAL Letter (Leave One Blank after one word):

7. Correspondence Address in the CAPITAL Letter (Leave One Blank after one word):

Photograph
of Applicant

State

Pincode

8. Mobile No.

Whatsapp No.

9. E-mail ID :

10. Date of Birth :

11. Gender : ✓ (Please Tick Mark)

12. Nationality : If Others Please Specify ✓ (Please Tick Mark)

13. Category : (Fill 1 for General, 2 for SC, 3 for ST, 4 for OBC, 5 for Ex-Servicemen)

14. Programme :

15. Month and Year of the Exam :

16. Centre from where appeared at Last Examination

MARKSHEET TO BE VERIFIED

Year	Passing Session	Marks Obtained	Total Marks	Remarks
	Total Marks			

PAYMENT DETAILS -

Bank Name				
Transaction Reference OR IMPS No. / Cash Receipt No.	Dated		Amount	

Signature of the candidate

Dated

GUIDELINES:

1. Fill up the prescribed application in capital letters.
2. Enclose self asstested copy of Marksheet that candidate required to be verified.
3. Scan and mail the mail documents at verify.marksheet@aicvps.org.
4. Submit the fee of Rs. 2000 as document verification charge. Submit the verification fee in AICVPS account only.

Note : Student will get confirmation within 20 days of submission of application for verification.