SWAMI KESHWANAND RAJASTHAN AGRICULTURAL UNIVERSITY, BIKANER

To,

Date:

The Controller of Examinations,

Swami Keshwanand Rajasthan Agricultural University Bikaner.

Mail-coeskrau@gmail.com

Subject: Request for the verification of the certificate/documents, issued by the COE, SKRAU Bikaner Sir, I request you to kindly verify the attached document/certificate issued by the Controller of Examination, SKRAU Bikaner. The details regarding certificate/document are as under: Name of Student Father's Name Mother's Name Name of College Name of Examination passed **Enrolment Number** Roll No./Registration Number Reason for which the above Document is to be verified No. of documents to be verified Fees Amount @ Rs.600/doc, Total Amount..... **Payment Details** Contact Number E-mail Id Yours Faithfully, (Signature of the authorized person) Complete Postal Address in capitals..... Pin Code No......

(For office use only)