### CHANAKYA NATIONAL LAW UNIVERSITY Nyaya Nagar, Mithapur, Patna

Letter No.-CNLU/Univ.Exam.Notice/261/2020- 958

Date: - 18.12.2020

#### **Examination Notice**

The students of Ph.D. (2017-2020), LL.M. (Session 2018-2019), B.A.,LL.B. (Hons.) & B.B.A., LL.B. (Hons.) (Session 2013-2018) & B.A.,LL.B. (Hons.) & B.B.A., LL.B. (Hons.) (Session 2014-2019) is hereby informed that they can collect their Original Degree in person or by their respective parents from 23.12.2020.

They can also collect the Original Degree through authorised person in enclosed Format (Format enclosed).

All the Degree will be handover after submission of No Dues Certificate (Format enclosed).

**Controller of Examinations** 

Registrar 18/12/2000

Copy forwarded to: Hon'ble Vice Chancellor, Registrar office, for information and record.

**Enclosure: As Above** 

## (Authorisation Letter)

	Date					
To,						
The Registrar, Chanakya National Law unive	rsity, Patna					
Dear Sir,  Release of Original I	Degree on Authorisation					
I	.Roll NoSession					
passed Ph.D. / LL.M. / B.A., Ll	L.B. (Hons.) / B.B.A., LL.B. (Hons.)					
in the YearI	hereby authorised Mr. / Ms.					
to collect my all original Ce	rtificates from the University. The					
Signature of Mr. / Ms	is attached with.					
	Your faithfully					
	Signature of Student					
Signature of Authorised Person	Name					
Signature of Mr. / Ms	is Attached herewith.					
Signature of Student.						

<sup>\*</sup> Strike course not applicable

# CHANAKYA NATIONAL LAW UNIVERSITY

NAYAY NAGAR MITHAPUR, PATNA – 800001



#### **DUES STATEMENT**

of

Mr./Ms.

	Mr./Ms Session		Roll No.	Y	Year			_Academic	
	ues Details:	-						,	
SI. No.	Department		Dues Amount		Concern Department				
			(if any)		Name		Designation		
1	Library								
2	Boy's Hostel								
3	Girl's Hostel								
4	Examination								
5	Fee Collection Department								
(B) <u>Da</u>	y Scholar D	etails:-							
SI. No.	Department	1st Year	2 <sup>nd</sup> Year	3 <sup>rd</sup> Year	4th Year	5 <sup>th</sup> Year	Signature of Warde		
1	Hostel								
ear Sir, With re	ference to abo	ve, I reques	st you to adi	ust the abo	ove dues wi	th my refund	lable secur	ity denocit	
emit the ba	lance amount	to me by R	TGS/ECS. E	Details of m	ıy bank par	ticulars is giv	en below.	ity deposit	
1) Account holder name :- 2) Bank account number :- 3) Bank name :- 4) Branch name :-									
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					(	_	noranjan Prasad Srivastava) Registrar		